CITY OF BIRMINGHAM

REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1947



Public Health Department,
The Council House,
Birmingham, 3.

29th July, 1948.

To the Chairman and Members, Health Committee.

At the time of preparation of this introduction, shortly after the "appointed day" under the National Health Service Act, some degree of unreality already attaches to considerable sections of the report, relating as these do to services and to institutions which have now passed out of the control of your Committee; while the new services, which have come to you in their place, will not find record until the next Annual Report.

In effect there is here presented the swan-song, so far as the City Council's jurisdiction is concerned, of the hospitals, the sanatoria, the maternity homes, the tuberculosis, the mass radiography and the venereal disease clinics, and the remaining services which have now been transferred to the care of the Birmingham, or in one instance of another, Regional Hospital Board. The occasion has been most fittingly marked by the farewell gathering which on your initiative, Mr. Chairman, and with the cordial endorsement of the Health Committee, was held immediately before the "appointed day"; a gathering at which, to the 1,000 representatives present out of the 3,000 staff who were to be transferred, heartfelt gratitude and goodwill were expressed for the fine service which they had rendered to the City Council in their several capacities, and good wishes for their future welfare in a service which will continue to be an integral part of the wider health services to which the City Council, the Birmingham Regional Hospital Board, the Board of Governors of the Teaching Hospitals and the Birmingham Executive Council will all make their indispensable contributions.

The year 1947, preceding as it did this great administrative and executive change, was one the records of which from the health standard were generally satisfactory. The infant mortality was only one point above that for 1946, so far a record for the City. The mortality among infants under 4 weeks of age dropped notably below the rate for that same unusually favourable year. Diphtheria, in the comparatively recent past a grave danger to the young child, caused only three deaths during the year—and even of these, one was far from certain in diagnosis, in a child only partially immunised, while the other two were in non-immunised children.

In the sphere of tuberculosis, while the number of notifications of new cases of tuberculosis of the lungs increased to the highest so far recorded since 1933, it can fairly be said that in substantial measure this is explained by more effective and thorough ascertainment, as shown by the much higher proportion of early cases detected, the proportion of early cases being nearly double that recorded in 1939.

In relation to the venereal diseases, known new cases of all forms have been markedly fewer than in 1946, which it is to be hoped will represent the highwater mark of their incidence in the City. The fact that new cases of congenital syphilis continue to be fewer in number year by year is in large degree the mark of an effective ante-natal service.

Among the acute infectious diseases, anterior poliomyelitis (infantile paralysis) was the only one to give serious cause for anxiety during the year. Birmingham shared the experience of the whole country in a wave of this grave infection; and particulars as to its extent are contained in the report.

Reference is made in some detail to housing problems, with special reference to the five Re-development Areas extending over the major portion of the central congested region of the City. Some indication has been attempted, both of the type and of the difficulty of the problems which face the Corporation in this sphere.

Reference will also be found to the Child Health Institute as a comparatively new development bringing together curative and preventive medicine in the interests of the young child, and having also its marked significance in relation to the quality of service of the future medical practitioner.

It is a pleasure to record the admirable spirit of keenness and cooperation which has been manifest throughout all sections of the Department, and I should wish to express my indebtedness to all for the cordiality of fellowship, which has made this Department a particularly happy one. To you, Mr. Chairman, and to the members of the Health Committee, I am grateful for the understanding, support and vigorous initiative which play no small part in the production of that keen and contented atmosphere in the Department, and in the maintenance of a wide-ranging service of health for the public.

Í am,

Your obedient servant,

H. P. NEWSHOLME,

Medical Officer of Health.

SECTION A

SUMMARY OF STATISTICS

For the Year 1947

Area (in acres)	••••	51,147
Population (Census, 1931)		1,002,603
Population, estimated by Registrar-General as at 30th June, 1947.	ral (Civilians o	nly) 1,076,230
The Registrar-General's estimated mid-y		
used for all relevant purposes throughout thi rates are based on less than twenty instances,	*	
Extracts from Vital Statistics of the year 1	1947 :	
Birth-rate per 1,000 population	22.2 (23,935	5 live births)
Stillbirth rate per 1,000 total live and stillbirths	23·5 (577 st	illbirths)
Crude Death-rate per 1,000 population	11.1 (11,999	9 deaths)
Maternal Mortality :—		
	Excluding maternal deaths after abortion	Including maternal deaths after abortion
	ajici accirion	ajior accirion
From Sepsis: (7 deaths, 4 abortic included)	•	agior accinion
	ons	0.29
included)	ons 0·12	
included) Rate per 1,000 live and still births From other puerperal causes (17 deat	ons 0.12	
included) Rate per 1,000 live and still births From other puerperal causes (17 deat 2 abortions included) Rate per 1,000 live and still birth	ons 0.12 ths, s	0.29
included) Rate per 1,000 live and still births From other puerperal causes (17 deat 2 abortions included)	ons 0.12 ths, s	0·29 0·69
included) Rate per 1,000 live and still births From other puerperal causes (17 deat 2 abortions included) Rate per 1,000 live and still birth	ons 0.12 ths, s	0·29 0·69
included) Rate per 1,000 live and still births From other puerperal causes (17 deat 2 abortions included) Rate per 1,000 live and still birth Total Maternal Mortality	ons 0.12 ths, s	0·29 0·69 —— 0·98
included) Rate per 1,000 live and still births From other puerperal causes (17 deat 2 abortions included) Rate per 1,000 live and still birth Total Maternal Mortality Infant Mortality:—	ons 0.12 ths, s	0·29 0·69 —— 0·98
included) Rate per 1,000 live and still births From other puerperal causes (17 deat 2 abortions included) Rate per 1,000 live and still birth Total Maternal Mortality Infant Mortality:— Deaths of infants under one year of ag	ons 0.12 ths, s 0.61 0.73 e per 1,000 live	0·29 0·69 0·98 births:

POPULATION AND MORTALITY STATISTICS

Population

In view of the fact that the Registrar-General has now larger access to population data than are available locally, the practice of utilising a local estimate of population has been discontinued.

The Registrar-General estimates the civilian population at 1,076,230.

Births (see page 23)

Deaths

The number of deaths during 1947 was 11,999, giving a death-rate of 11·1. The average rate for the ten years prior to 1947 was 11·9, while that for 1946 was 11·3. The death rates for 1940 and 1941 were swollen by air raid deaths.

The changes in the death-rate in England and Wales and in Birmingham during the past forty-seven years can be seen from the figures below, although the figures for 1940 and 1941, enlarged as they are by air-raid deaths, obviously cannot fairly be compared with others.

DEATH-RATES IN BIRMINGHAM AND ENGLAND AND WALES

			Birmingham	England and Wales
1901-1905	••••		16.5	16.0
1906-1910	••••		15.0	14.7
1911–1915	••••	•••••	14.6	14.3
1916–1920	••••	*****	13.4	14.4
1921-1925	••••	•	11.5	12.1
1926-1930			11.6	12.1
1931-1935	••••	•	11.2	12.0
1936			11.3	12.1
1937		•	11.7	12.4
1938	••••	••••	10.9	11.6
1939	••••	••••	11.4	12.1
1940	•	••••	14.3	14.3
1941	••••	••••	13.2	12.9
1942	•••••	••••	11.8	11.6
1943	••••		12.1	12.1
1944			11.2	11.6
1945			11.2	11.4
1946			11.3	11.5
1947			11.1	12.0

The death-rates in Birmingham from the more prominent causes of death over a series of years are shown below:—

				Cancer	Diseases of the Heart and Blood vessels	Bronchitis. Pneumonia, and other respiratory diseases
1938	****			1.59	3.45	1.18
1939		••••		1.55	3.65	1.16
1940				1.61	3.31	2.21
1941				1.70	3.10	1.94
1942			••••	1.77	2.87	1.51
1943				1.83	3.02	1.73
1944				1.75	3.15	1.40
1945				1.84	3.14	1.44
1946				1.90	3.36	1.37
1947				1.83	3.34	1.48

Amongst males 76.3% of cancer deaths were due to cancer of digestive and respiratory organs, whilst 64.3% of cancer deaths in women occurred in digestive and genital organs, and 20.2% were due to cancer of the breast.

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES

1. General Services.

(a) Laboratory facilities

I—City Bacteriological Laboratory

GENERAL LABORATORY

The work done in the City Bacteriological Laboratory is set out in detail below:

GENERAL LABORATORY					No. o	f Specimens
				re	ceived	for examination
Swabbings, various						2,435
,, diphtheria	bacilli					2,934
Sputum for tubercle ba	acilli					1,556
Sputum others						710
Faeces cultures						3,339
Faeces tubercle bacilli						1,373
Fluids						728
Blood for Widals		•				479
Stomach washes		•				297
Urines						500
						1,124
Milks tubercle bacilli						1,748
Waters						970
Shell fish						43
Foods						30
Creams	,					68
Ice creams						348
Blood cultures						39
Cord powders						1,687
Measles serum	•					239
Blood films	•		•			24
Miscellaneous						14
						20,685
VENEREAL DISEASES LA	ABORA	ATOE	RY			
Blood for Wassermann					••••	41,928
Cerebro-spinal fluid						·
(a) For Wasserma	ann rea	ction				1,519
(b) For cell count						534
Films for gonorrhæa						16,193
· · · · · ·						468
Gonococcal fixation tes	sts					5,445
Vaccines prepared						17
Cultures prepared		••••				13,139
Van den Bergh's tests		••••				2
· · ·						34,047
Serum for spirochaetes						1
TO 1 TO 11 / /-			••••			8
			TATOT	****		113,301

II—City Analytical Laboratory

The following statement indicates the samples analysed in the City Analyst's Department:

Samples Analysed:

Food and drug samples					5 , 3 35
Soot gauge samples	•····			••••	24
Fertilisers and feeding st	tuffs		****		19
Miscellaneous samples		*****			1,447
	Тот	AL	••••		6,825
Samples Adulterated, etc.:					
Samples adulterated					344
False labels	•		•···•		9
Number of prosecutions	••••			•	28
Number of fines	••••	••			3
Amount of fines and cos	ts			£	28/13/0
Number of cautions					139

Details of this work are given in the Report of the City Analyst, printed separately.

III—Hospital Laboratories

Laboratories are provided at:

Dudley Road Hospital: General and biochemical.

Selly Oak Hospital: General and biochemical.

Little Bromwich Hospital: Bacteriological, infectious diseases.

Yardley Green Road Sanatorium: Bacteriological, etc., tuberculosis.

Carnegie Institute: General and biochemical.

(b) Ambulance Services

The Health Committee have four ambulances for acute infectious diseases (Little Bromwich Hospital) and two for tuberculosis. The ambulance services for the general hospitals are supplied through the Birmingham Hospitals Contributory Association in conjunction with the St. John Ambulance Brigade.

The Watch Committee have eight police ambulances for accidents and other casualties.

There are also ambulances at some of the large voluntary hospitals and at certain works.

(c) Nursing in the Home

Arrangements have been in force, over a period of years, for the home nursing of a number of conditions by the district nurses of the local District Nursing Associations, and 430 cases were thus nursed during 1947. This figure includes 244 cases of pneumonia and 142 of puerperal pyrexia, and 32 children under five years old are included in the total of 430 cases.

Apart from hospital treatment, cases of ophthalmia neonatorum and of other forms of ophthalmia or eye injury capable of leading to blindness are visited in their homes, as far as necessary, by nurses from the Eye Hospital, an annual grant being paid to the hospital in respect of this service.

Removal of Aged and Infirm.

During 1947, 51 cases were investigated with a view to possible removal to an institution under either Section 38 of the Birmingham Corporation (General Powers) Act, 1929, or Section 48 of the 1935 Act. Six of the cases were voluntarily admitted to Institutions, and a further three cases died before appropriate action could be taken to remove them.

The remaining 42 cases investigated were found to lie outside the scope of either Section 38 or 48, and in this regard it was noted that a number of them showed signs of undue pressure having been put on the aged person to enter an institution by either a sub-tenant or by interested relatives, in order either to obtain possession of the house or to avoid the responsibility of their care.

Generally speaking, old persons are very reluctant to enter an institution in their declining years, and prefer to maintain an independent life under substandard conditions rather than submit to the very necessary though gentle discipline of a hospital or infirmary ward.

No application was made for compulsory removal to an institution during the year.

(d) Treatment Centres and Clinics

Anti-Tuberculosis Centre. (See page 156).

Maternity and Child Welfare Centres. (See page 53).

Public Dispensaries (Voluntary)

Dispensaries for the treatment of the sick poor are provided by six different voluntary societies in the City, chief among which is the Birmingham General Dispensary. This latter, with different branches, treated 37,054 patients during the year, while the others provided treatment in a lesser proportion.

(e) Hospitals

PUBLIC GENERAL HOSPITALS

General Statistics

The statistics relating to the work of Dudley Road and Selly Oak Hospitals and Selly Oak Infirmary are given below.

IN-PATIENTS

	Acute S	Sick	Chronic Sick
L	Oudley Road	Selly Oak	Selly Oak
	Hospital	Hospital	Infirmary
*Total number of admissions (including			
infants born in hospital)	19,355	9,958	1,929
Number of women confined in hospital	3,135	820	
Number of live births	3,082	813	_
Number of stillbirths	122	21	
Number of deaths among the newly-			
born (under four weeks, born in			
hospital)	93	41	_
*Total number of deaths	1,228	400	826
*Total number of discharges (including			
infants born in hospital)	18,183	9,522	1,105
* Excluding E.M.S. cases	and service ca	asualties.	

OUT-PATIENTS

	Acr	Chronic Sick.	
	Sia		
I	Dudley Road	Selly Oak	Selly Oak
	Hospital	Hospital	Infirmary
Number of persons seen in out-patient			
department	26,642	17,115	Run in con-
Total number of attendances	96,850	81,145	junction
Number of women seen at ante-natal			with
clinic	2,749	1,012	Selly Oak
Total attendances at ante-natal clinic	12 ,113	6,158	Hospital

Dudley Road Hospital

This is a municipal general hospital for the acute sick, and is situated in the north-western portion of the City.

Dr. T. M. Anderson, Medical Superintendent of the Hospital, reports as follows:—

YEARLY REPORT OF THE MEDICAL SUPERINTENDENT DUDLEY ROAD HOSPITAL

JANUARY 1st to DECEMBER 31st, 1947

We have learnt to expect that each year steady and increasing demand will be made upon us. Close on twenty thousand patients are now admitted for treatment each year, and all out-patient departments are working at high pressure under difficult conditions, and often quite inadequate accommodation.

We have fortunately been able to reinforce our medical staff, and are glad to welcome a number of new physicians, assistant physicians, assistant surgeons, assistant gynaecologists and obstetricians, radiologist, assistant pathologist and assistant biochemists.

The appointment of Assistant Physicians and Surgeons has enabled us to operate an appointments system for new out-patients. We hope later to extend this arrangement to cover all out-patients when the necessary accommodation and increased nursing staff become available.

The medical staff, in addition to their ordinary routine work, arranged to deliver a series of lectures to forty student nurses, under the intensive course of training for nursing orderlies from the Services, organised by the Ministry of Health. These students are accommodated in a hut, erected in the hospital grounds for this purpose, and a Sister-Tutor, appointed by the Ministry of Health, is in charge.

A post-graduate refresher course for insurance practitioners was held here from April to July, 1947. Lectures were given twice weekly on medicine, surgery, gynæcology and obstetrics, and pathology, by senior members of the medical staff. About twenty doctors attended this course.

Regular bi-monthly clinical meetings are held in the Hospital, and are well attended by both senior and junior staff, resident and non-resident.

Mr. Wentworth Taylor reports that the Maternity Department has worked to full capacity, 4,037 cases being admitted and 3,135 confinements undertaken. Although many cases were admitted for domestic reasons, a considerable amount of abnormal midwifery was encountered.

Of eight maternal deaths, three were associated with severe pregnancy toxæmia, two occurred suddenly due to pulmonary embolism, two (one undelivered at 24th week of pregnancy) due to sepsis and one due to pulmonary œdema and heart failure following forceps delivery.

Of ninety deaths of infants under ten days, sixty were due to prematurity, nine to severe fœtal abnormalities, and three to neo-natal infections. Including all minor degrees the incidence of sepsis in infants was 5%. During the year, nine infants presented signs of severe hæmolytic disease and three died despite early transfusion.

309 living premature infants were delivered, 31 being less than 3 lb. weight; 238 were reared. Two of those who died had abnormalities incompatible with survival.

122 infants were stillborn, an adequate cause being found in all but 27 cases. In this group the fœtus had died before the onset of labour and no reason could be found. Despite more careful and complete investigation each year, this class of still-birth appears to be increasing.

Dr. J. D. Brown, who succeeded Mr. D. H. Cummack as Radiologist here in October, 1947, reports that the work of both the Diagnostic and the Therapy Departments has increased during the last few years, as the following figures show.

		Diagnostic Department No. of Radiographs	Therapy Department No. of Irradiations
1940	 	 22,612	
1941	 	 23,968	1,771
1942	 	 26,484	613
1943	 	24,006	1,150
1944	 *****	27,073	2,369
1945		28,714	2,182
1946	 	29,052	4,420
1947		37,204	5,890

Dr. W. Whitelaw, Senior Pathologist, reports great increase in the work of his Department; nearly 4,000 more examinations were required than in 1946. A special section of hæmatology has been organised by him, and this is working well. Miss Trought, Senior Biochemist, has now two Assistant Biochemists with the B.Sc. qualification, and her Department is always at high pressure.

Miss O. M. Snowden, O.B.E., retired from the Hospital Service in November, 1947. She was appointed Matron here in May, 1925, and continued in that office until 1941, when she was appointed Matron-in-Chief to the Municipal Hospitals. This was a war-time appointment which terminated on her retirement.

I have had the pleasure of working with Miss Snowden during all that period, and I should like to express the high appreciation which we all felt for her tremendous energy, her high courage and entire devotion to duty. She was an exceptional person and had great ability. I know of no one who worked harder for the welfare of her nurses.

We welcome Miss A. Birtwistle, who was appointed Matron in November, in just recognition of the good work which she has done as Deputy Matron here since 1943.

Miss Birtwistle reports that, during the year 1947, we continued to experience great difficulty on the nursing side through lack of trained nurses. The recruitment of student nurses remained much the same as in 1946. There was, however, a reduction in wastage (40% approximately), in 1947. We maintained full holidays and block system training without having to curtail the number of hospital beds. Staff nurses and student nurses are working more than a 48 hour week. The health of the staff has been satisfactory.

During 1947, two Dudley Road Hospital trainees visited Canada, and the United States of America, attending the International Congress of Nurses in Atlantic City, and visiting many hospitals in Toronto, Montreal, New York and Philadelphia.

The Pre-Nursing Course, begun in 1941 at this Hospital, continues; 17 girls commenced in September, 1947, and it is hoped that all will be successful and will enter for general training in September, 1948

The modernisation of Wards B.9 and B.10 has been completed and this has considerably facilitated the nursing of patients, and also improved the conditions for the nursing staff.

A separate Occupational Therapy Department has been erected and is now functioning, by the adaptation of a hutment, which would appear to meet the present needs satisfactorily.

Owing to the age of the building and plant, and lack of proper maintenance over the past few years, extensive repairs and maintenance work have been undertaken during the year.

I should like to thank all members of our hospital staff who have worked with such energy and devotion to duty. The nursing staff particularly, deserve special credit for their fine effort.

Dudley Road Hospital

Yearly Report, January 1st to December 31st, 1947

Admissions for the year		19,355	Excluding E.M.S.
Total discharges		18,183	cases such as War
Total deaths		1,228	Casualties, Members
No. of women confined in hospit	al	3,135	of H.M. Forces,
No. of live births		3,082	Transferred War
Maternal Deaths		8 J	Workers, etc.
E.M.S. cases		353	
Duration of Stay		Excluding	E.M.S. Including E.M.S.
Under four weeks		17,4	
Four weeks and under 13 weeks			793 1,854
Thirteen weeks and over		,	00 211
Average number of beds occupie	d		747
Highest number of beds occupied	d (on	17th January,	1947) 862
Lowest number of beds occupied	l (on 2	24th December	, 1947) 606
Operations			
Number of major operations			6,056
(Minor and dental operation	s excl	uded)	plus 574 bloods taken
Out-Patients		Excluding	E.M.S. Including E.M.S
Total number of out-Patients		26,6	· ·
Total attendances		96,8	
Ante-natal clinic (mothers)	*****		749 2,749
Ante-natal clinic (attendances)		12,1	· · · · · · · · · · · · · · · · · · ·
(attendances)		, -	
Pathological Department			
Examinations		*****	18,313

684

Autopsies

Bio-Chema	ical Depar	rtment							
Exami	nations	•		*****	*****			*****	17,859
Radiologic	al Depart	ment							
Radiog	raphs	••••			*****	*****			37,204
Fluoros	scopic exan	inations		*****					2,545
Exami	nations (pa	tients)			*****	•••••			18,794
Th	nese figures	include :	_						
	Opaque i	meal exa	minati	ons				1,687	
	Opaque e	enema ex	amina	tions				272	
	Oesophag	geal exan	ninatio	ns				63	
	Pregnanc							1,277	
	Urinary t		minati	ions				741	
	Cholecyst	0						435	
	Bone exa							8,252	
	Chest exa		ns					7,681	
	Miscellan	eous						196	
Physio-Th	erapy Dep	ba rt men	t			,			
Attenda	ances	•••••				*****	*****	*****	71,606
Dental De	bartment								
	ances	•••••		•••••	*****	*****	*****	*****	869
Maternity	Departm	ent.							
Total numb	er of delive	ries	3,13	5	Booke				2,770
Still-births			12	2	Emerg	gencies			365
Neo-natal d		in ten	14	_					
days of bi		THE COIL	9	0					
Maternal de	atha		_		ding on	e undel	ivered	24 weeks	pregnant)

Selly Oak Hospital and Infirmary

This is a municipal general hospital for the acute sick, and its adjoining infirmary accommodates chronic sick. Both are situated on the border of Bournville in the southern sector of the City.

MR. R. P. S. Kelman, Medical Superintendent, reports as follows:

(a) Selly Oak Hospital.

The admissions during the year have had to be curtailed owing to the general shortage of nursing staff, but even then, the total has reached the figure of 10,035. Advantage was taken of the ward closed to complete the interior decoration of all wards, the last ward being completed in July. The average duration of stay of patients was 14·4 days. The new nurses' home (Springfield), was opened on 6th June by the Lord Mayor (Alderman A. F. Bradbeer, J.P.). This welcome addition to the accommodation for student nurses has relieved one of our chief anxieties, and has enabled the Preliminary Training School to function more easily.

The following are the examination results for the year:-

	Passes	Failures
State Examination Results:		
Preliminary examination	 30	1
Final examination	 27	2
State Certified Midwives' examination (Part I)	 33	6

The new recreation hall in Springfield Nurses' Home has been used to the fullest extent both for numerous dances, concerts and daily for badminton. Credit is due to Miss V. E. S. Adams, the Warden, and Miss E. Rockey, the Assistant Warden, for the smooth working of the home and recreation hall.

Many improvements have been made to the existing Out-Patient Department. An army hut has been erected to provide office and additional waiting accommodation and the adjoining ward (C.2) has been included in the Department for the ante-natal, post-natal, gynæcological and baby clinics. The following weekly Out-patient Clinics have been held during the year:—

(a) Consultative Clinics:

Medical		 					11
Surgical		 					15
Ear, nose and	throat	 				••••	3
Gynaecological		 			••••		2
Obstetric-An	te-natal						3
Pos	t-natal	 	:	*****			1
Bal	ру	 					1
Psychological		 					1
Dental	••••	 					1

(b) Daily Treatment Clinics:

Fracture clinic
Septic hand clinic
Minor surgical out-patient clinic
Physiotherapy clinic
Remedial exercise clinic
Occupational therapy clinic
Dental clinic

A source of anxiety is the growing lists of patients waiting for admission. The immediate solution appears to be a return to the war-time method of using a recovery unit reasonably near at hand, to enable patients to be transferred before complete recovery and so to provide more hospital beds for more new admissions. The beds equipped in the hospital are strictly limited by the nursing staff available. The nursing staff have been assisted in their work by the maximum employment of assistant nurses and ward orderlies of both sexes. Ward domestic staff have been maintained at a high level, but difficulties have arisen through absenteeism.

Our recreational facilities have been much extended during the year. All the hard tennis courts are now back to normal and the Cricket Club has had a very successful season with two teams. The Male Officers'

Recreation Club has also run a billiards, snooker and darts section. This Club is to be congratulated on the number of excellent dances and whist drives given during the year.

Better accommodation has been provided for the Almoners, who have been increased to three. This has enabled more work to be carried out for the chronic sick in the adjoining Infirmary. There has been an increase of 186 patients investigated, and all patients attending the diabetic clinic are now interviewed. Arrangements for patients' transport have taken up an increasing amount of time. The Hospital Car Service continues to give valuable help. There has been a considerable increase in the sums distributed from the Patients' Comforts Funds. Fortunately the donations to the two patients' comforts funds have been £217 8s. 0d. A summary of the financial statement for this department is as follows:—

General receipts				••••		£2	,034	4 8
General expenditure						£2	,888	3 4
Sums recovered for surg	ical ap	pliance	S			£	317	9 10
The following are th	e pati	ents re	eferred	l for a	ssistar	ice :—	-	
Out-patients								642
In-patients (Hospital)								736
In-patients (Infirmary)	••••							172
							-	
								1,550
							_	

Considerable progress has been made in the Pharmaceutical Department by the acquisition of modern equipment. The aseptic laboratory prepared 3,200 litres of sterile solutions for intravenous therapy and dispenses 5,000 million units of penicillin. Sterile intramuscular injections prepared have been numerous and include solutions of morphia, hyoscine, nikethamide, procaine, ephedrine, calcium gluconate, etc. The production of the intravenous solutions in the laboratory represent a saving of £350 on the market prices to purchase. The galenical laboratory prepared 500 gallons of various kinds of emulsions, creams and lotions for use in the Hospital and various other institutions. During and since the war these facilities have provided products otherwise unobtainable. 50,000 inpatient and 8,200 out-patient prescriptions were dispensed during the year. The staff consists of 3 pharmacists, 1 dispenser, 3 articled pupils and 2 porters. During the year one of the pupils gained the Leverhulme Scholarship.

The Surgical Mechanics' Department, with the return of staff, has returned to pre-war strength. Additional equipment has been supplied and it has maintained all surgical instruments, surgical equipment and aseptic furniture in a state of good repair. The following surgical appliances have been made in the Department:—

Trusses		 		 	117
Callipers		 		 	34
Double leg ir	ons	 ••••		 	17
Spinal suppor	rts	 •			39
Boot alteration	ons	 			70
Boot-cork r	aisings			 	21
Wrist suppor	ts	 			11
Arch support	s	 		 	19
Plaster pylon	ıs	 		 	4
Wire jaw spl	ints	 	 	 	7

Great development has taken place in the Occupational Therapy Department. The following were the treatments given:—

Out-patients' remedial treatments	 	 	 1,491
In-patient remedial treatments		 	 580
In-patient diversional treatments	 	 	 3,769

There is still further scope for occupational therapy for in-patients, particularly for the chronic wards of the Infirmary.

The orthopædic and fracture out-patient clinics are attended by the Occupational Therapists to report progress on patients, to obtain directions from the surgeons and to learn more about the patients.

The post of Superintendent Physiotherapist was filled in March and the establishment of the Department was steadily brought up to normal during the year. 23,155 out-patient and 9,861 in-patient treatments were given. The rehabilitation gymnasium has proved to be an increasingly popular and useful sub-section. Two physiotherapists are now employed in the gymnasium and both class work and individual treatments are given. The classes given include:—

Breathing classes for asthmatic and tonsil and adenoid cases, etc. Orthopædic classes.

Classes for re-education in walking and postural deformities. Classes for the student nurses Preliminary Training Schools.

A close liaison exists between the Physiotherapy and Occupational Therapy Departments, some patients receiving treatment in both departments. Various ward classes in both the Hospital and the Infirmary are carried out regularly. Classes in the Maternity Wards have been in existence for some years and now greater emphasis is being placed on post-operative classes in the surgical wards. The larger staff has made possible the commencement of classes in the chronic wards of the Infirmary and these have proved most successful in leading to cases being made ambulatory and fit for discharge. Short-wave therapy has been used much more and an additional modern unit is now on order. The epidemic of acute anterior poliomyelitis has

added to the work of the department. Space has limited the further development of the ultra violet ray department. It is hoped that the remodelling of the old hospital laundry as a Physiotherapy Department, already approved, will soon be carried out.

The Obstetric Department has worked to full capacity and as the figures below show is a centre for abnormal midwifery.

Total No. of W	omen o	confine	ed in F	Hospita	.1	8	22	
Complications of Pregnar	icy:							
Hyperemesis								10
Pre-eclampsia								38
Eclampsia								4
Ante-partum haemo	rrhage							31
Multiple pregnancy								15
Cardiac disease								12
Hypertension								5
Pulmonary tubercul	osis							3
Hydramnios								9
Contracted pelvis								94
								221
Abnormalities of Labour	:							-
Caesarean Section								80
Forceps								39
Episiotomies								255
Surgical inductions								32
A 1 1	ion							
Abnormal presentat	1011							39
Manual removal pla								39 11
•								11
•								
•								11
Manual removal pla								11
Manual removal pla Infant Mortality:	centa							456
Manual removal pla Infant Mortality: Stillbirths	centa							11 456 —

The Clinical Photography Department was recommenced at the end of the year. In addition to clinical and microphotography the clinical photographer is acting as the technician to the electro-cardiograph department.

Improved facilities for visitors have been provided in a heated wooden hut near the entrance to the Hospital. Another urgent need is for sleeping accommodation for relatives who have to remain near at hand when patients are dangerously ill.

The canteen has worked very successfully throughout the year, and has added greatly to the well-being of the staff.

The Dental Department is now fully staffed and temporary accommodation has been found in the large side ward of C.2 ward. This department acts in a consultative capacity, and all in-patients are charted dentally.

The following is an analysis of the accidents dealt with in the Casualty Department of the Hospital:—

		••••	 				681
	••••		 				1,067
			 				275
			 				1,137
·			 				34
			 				3
cases			 				69
			 				16
			 				227
						-	
	cases		 	Cases	Cases	Cases	Cases

3,509

The grounds of both the Hospital and the Infirmary have been brought back to normal again. Five acres of land are under cultivation, providing vegetables for patients and staff. Great credit is due to the Head Gardener and his staff for the remarkable display of flowers.

We regret the passing away of Mr. Arthur Lloyd, our building foreman, after 16 years of service in this Hospital.

The appointment of assistant physicians and surgeons has made a great difference to the general working of the Hospital and the Infirmary. It has permitted an increase in the consultative work of the out-patient department and made possible some post-graduate teaching. Supernumary registrars holding Class III appointments under the demobilisation scheme and studying for further diplomas have been employed throughout the year and post-graduate refresher courses have been given to medical practitioners.

Many clinical and technical meetings were held during the year. Fortnightly meetings of the Selly Oak Hospital Medical Society and the usual clinical meetings of the clinical and pathological section of the Birmingham Branch of the British Medical Association, the University of Birmingham Medical Society and the Association of Clinical Pathologists have been the more important ones.

The following figures for the special departments give some indication of the work done:—

Radiological Department		
Number of patients	 	 9,210
Total examinations—Radiographic	 	 21,084
Fluoroscopic	 	 1,484
Films used	 	 18,939
Pathological Department		
Number of examinations	 	 20,018
Number of autopsies	 	 431
Bio-Chemical Department		
Number of examinations	 	 6,839

Physiotherapy Cases	*	artmen	it				A 955
Cases	•••••	•••••	*****	•••••	•••••	 	4,355
Remedial Exe	rcise	Depar	rtment				
Cases		••••	•••••		*****		1,549
Occupational :	Thera	ру Де	epartm	ent			
Cases				••••	*****	 	788
Dental Depar	tment						
Attendand	ces			•		 	1,497
Operations							
Operations	s	••••				 	4,452

Selly Oak Infirmary

Selly Oak Infirmary deals with chronic diseases of all ages and in two wards with acute medical diseases of children of the age of five years and under. The year has been one of steady progress in every direction. The staffing position has shown continous improvement both as regards state registered nurses and assistant nurses. An assistant nurses' training school has been started and student assistant nurses are being regularly engaged. War damage repairs to all wards have been completed and re-decoration has been commenced. A night kitchen staff has been engaged, making it possible for all night nursing staff to have meals in the central dining room and producing a marked improvement in the patients' breakfasts.

The closing of wards enforced by staff shortages and continued during the year because of the very necessary ward repairs has augmented the existing deficiency in beds for the chronic sick. An extremely dangerous position has been reached where it is quite obvious that there are insufficient beds available in the City for the chronic sick. Throughout the year there has always been a waiting list of chronic sick requiring admission. Those waiting have been under constant review and priority of admission has been dependent entirely on their medical states and home conditions.

One wing of Springfield Nurses' Home has been allocated to the assistant nurses of the Infirmary. This has eased the accommodation problem considerably. But more resident staff accommodation still is urgently required. Too many of the nursing staff are non-resident for efficient and easy administration.

The wards equipped are now well staffed but overcrowded. As long as a waiting list persists it will not be possible to reduce the number of beds in wards. The chronic wards equipped during the year have been:—

- 1 Male surgical
- 2 Male medical
- 2 Female surgical
- 5 Female medical

As with last year some excellent results of surgery in the aged have been obtained in femoral fractures and in the urological section. On the medical side neurological, diabetic and rheumatic carditis cases are grouped together. The improved staffing of the Physiotherapy Department has made possible the starting of ward classes in the Infirmary with most beneficial results. Likewise remedial and diversional occupational therapy has been extended during the year.

The grounds of the Infirmary have been further opened up by the removal of the unnecessary walls and trees. Flower beds have been planted near the ward windows and the gardens generally improved.

Approximately 57% of the admissions to the Infirmary have been discharged home. This is the same as for last year. The total admissions for the year have been 1,930, and the average duration of stay of patients has been reduced from 96 days in 1946 to 90.47 days. The number of occupied beds has been as follows:—

(a)	Average during the year		 	 	 544
(b)	Highest on 31.10.47		 	 	 57 3
(c)	Lowest on 4.7.47 and 26.7.	.47	 	 .0	 521

REPORT ON MATERNITY AND CHILD WELFARE

By Dr. Jean M. Mackintosh,
Senior Assistant Medical Officer of Health (for Maternity and Child Welfare)

VITAL STATISTICS, 1947

For the purpose of this Report the population given by the Registrar-General is used for the birth rate, but the figures used for the stillbirths, infant and maternal deaths are local figures.

Births—Live Births, 23,935. (22,625 legitimate, 1,310 illegitimate). There were 385 sets of twins and 2 sets of triplets born in 1947.

Population, Registrar General's estimate, 1,076,230.

Birth-rate, 22.2 per 1,000 population.

Illegitimate Birth Rate 5.5 per cent. of live births.

Infant deaths, 972. (888 legitimate, 84 illegitimate).

Infant Death Rate, 41 per 1,000 live births. (39 legitimate, 64 illegitimate). Stillbirths, 577. (548 legitimate, 29 illegitimate).

Stillbirth Rate, 23.5 per 1,000 total births (live and still). (23.6 legitimate, 21.7 illegitimate).

Neo-natal Mortality, 20.9 per 1,000 live births. (500 deaths).

Maternal Mortality Rates in Childbirth (24 deaths),

including deaths after abortion, 0.98 per 1,000 total births (live and still), or 1.00 per 1,000 live births.

excluding deaths after abortion, 0.73 per 1,000 total births (live and still) or 0.75 per 1,000 live births.

GENERAL COMMENTS

Births

The birth rate fell from 22.5 in 1946 to 22.2 in 1947. The illegitimate birth rate per 1,000 live births was:—

Illegitimate Births							Illegitimate Births			
per 1,000 live births							,000 live bis	rths		
1940			36.8	1944			64.1			
1941			48.2	1945			92.0			
1942			54.3	1946	•		67.6			
1943			57.6	1947	••••		54.7			

Stillbirths

The stillbirth rate for 1947 shows a slight fall when compared with 1946, as shown in the following table:—

Rate per							Rate per		
1,000 total births							1,000	total births.	
1940				33	1944				25
1941			••••	29	1945				25
1942				28	1946				25
1943				27	1947		••••		24

A special investigation into births taking place in and belonging to Birmingham has been made by Dr. Crosse. Births occurring outside the City and credited to Birmingham were excluded. The causes of stillbirths in this group of births is shown below:—

STILLBIRTH RATE BY CAUSE OF DEATH, 1945—47 (Birmingham births occurring in Birmingham)

1945

1.9

4.0

2.2

1.8

14.7

24.7

3.3

3.6

2.7

1.6

15.8

25.6

1946

1947

3.0

3.2

2.0

1.3

13.8

23.8

(1)

Deaths occurring before labour:

Other difficult labours

All causes of death during labour

Unknown causes

Total Stillbirth Rate

Other intra-natal causes

•			2.3	1.5	2.4
			0.2	0.2	0.1
		•	$0 \cdot 3$	0.4	$0 \cdot 4$
ons	••••		0.9	1.1	0.4
			$0 \cdot 3$	0.4	0.4
			1.6	1.3	1.2
			0.8	0.6	1.1
			3.6	4.3	4.0
			10.0	9.8	10.0
our:					
			1.5	. 1.0	
••••	•···		1·5 0·2	1.0 —	1·3 0·1
			1·5 0·2	1·0 — 0·1	1.3
				 0·1	1·3 0·1 0·1
			0.2	_	1·3 0·1
 ns			0·2 — 0·2	 0·1 0·2	1·3 0·1 0·1 0·2
	ons	ons	ons	0.2 0.3 ons 0.9 0.3 1.6 0.8 0.8 1.6 1.6 1.6 1.6 1.6	0.2 0.2 0.3 0.4 0.9 1.1 0.3 0.4 1.6 1.3 0.8 0.6 3.6 4.3 10.0 9.8

The stillbirth rate among Birmingham births occurring in Birmingham reached a new low level during 1947, the reduction being entirely in the deaths occurring during labour. Deaths from the various causes fluctuate from year to year and it is impossible to give a definite cause for the reduction.

Infant Mortality-Cause of Death

The impression to be gained from a study of the figures for 1947 and the trend over the past few years is that while the general standard of midwifery, including the ante-natal care of the mother and the care of the infant under 4 weeks shows slow but steady improvement, in spite of difficulties referred to later in this report, less satisfactory progress has been made in the control of the infections which are the main cause of infant death between 4 weeks and one year. The present state of overcrowding, with its almost inevitable effect of lowering hygienic standards makes the control of these infections still more difficult.

The infant mortality for 1947 was 41. The following table compares the Birmingham rates in recent years with those of England and Wales.

	Bir- mingham.	England and Wales.		Bir- mingham.	England and Wales.
1940	70	55	1944	42	46
1941	69	59	1945	49	46
1942	56	49	1946	40	43
1943	55	49	1947	41	41

While there has been only a slight increase in the total infant death rate in 1947, the death rate over one month has shown an increase from 17.9 in 1946 to 19.5 in 1947. The neo-natal death-rate, on the other hand, has fallen from 22.1 to 20.9.

The following table shows the main causes of infant death for the years 1944 to 1947:—

			1944	1945	1946	1947
Total infant death rate			42	49	40	41
Respiratory disease			7.9	11.2	8.1	8.6
Diarrhoea and enteritis			5.8	7.3	6.4	7.0
Congenital malformation	ıs		5.7	5.7	4.8	5.1
Prematurity			9.3	10.5	7.8	5.9
Atrophy, debility, mara	smus	and				
atelectasis			2.6	1.8	2.4	2.6
Injury at birth			2.8	2.6	4.6	4.8
Other causes			7.9	9.9	5.9	6.6

From this it will be seen that whereas the deaths from respiratory disease, diarrhoea and enteritis have risen slightly the deaths from prematurity show a fall.

INFANTILE MORTALITY DURING THE YEAR 1947

Deaths from stated causes in weeks and months under one year of age

Cause of		WEE	KS		Total under One		MONTHS			
Death	0—	1	2—	3—	Month	1-	- 3-	- 6-	- 9	One Year
Cerebro-spinal fever	_	_	_	_	_	_	1	1	1	3
Scarlet fever	_	-	-	-	_	-	-	-		-
Whooping cough	-	-	-	-	-	3	5	2	5	15
Diphtheria and croup	-	-	-	-	_	_	-	-	-	-
Tuberculosis of lungs	-	-	-	_	_	_	_	-	_	-
Tuberculous meningitis	-	-	-	_	-	_	_	1	_	1
Abdominal tuberculosis	-	_	_	_	_	_	-	_	_	_
Other tuberculous diseases	_	_	1	_	1	_	5	-	1	7
Syphilis	_	-	-	_	_	_	_	-	_	_
Influenza	-	-	-	_	_	1	2	-	_	3
Measles	_	-	-	-	_	1	-	1	2	4
Rickets	_	-	-	_	-	_	-	_	_	-
Meningitis (not tuberculous)	_	-	_	_	_	3	1	_	_	4
Convulsions	_	1	_	_	1	_	_	_	_	1
Otitis media & mastoiditis	1	_	_	1	2	7	6	5	2	22
Bronchitis	_	1	_	_	1	2	1	3	1	8
Pneumonia (all forms)	12	13	16	7	48	53	52	32	13	198
Gastritis	_	_	_	_	_	_	_	_	_	_
Diarrhoea, enteritis, etc	_	3	2	5	10	58	54	33	12	167
Congenital malformations	55	9	7	4	75	23	16	6	3	123
Atrophy, debility and										
marasmus	4	2	5	_	11	_	_	_		11
Premature birth	124	7	2	4	137	4	_	_	_	141
Injury at birth	103	7	3	_	113	1	_	_	_	114
Atelectasis	48	4	_	_	52	_	_	_	_	52
Suffocation (overlying)	1	_	1	_	2	_	_	_	_	2
Neglect (under 3 months)	_	_	_	_	_	_	_	_	_	-
,	33	7	3	4	47	16	12	16	5	96
All Causes	381	54	40	25	500	172	155	100	45	972

Neo-natal Mortality

The neo-natal death rate (i.e. the rate below 4 weeks of age) for 1947 shows a fall compared with 1946 as the following table shows:—

		e per live births			ate per live birtl	hs
1940	 L	28.8	1944	 	22.2	
1941	 	29.1	1945	 	22.5	
1942	 	30.1	1946	 	22.1	
1943	 	25.7	1947	 	20.9	

An investigation, similar to that carried out in relation to stillbirths, has been made into neo-natal deaths occurring in births belonging to and taking place in Birmingham. The result is shown in the following table:—

NEO-NATAL DEATH RATE PER 1,000 LIVE BIRTHS (Birmingham births occurring in Birmingham)

	1942	1943	1944	1945	1946	1947
Ante-natal causes:				10 10	1010	1011
Toxaemia	2.3	1.3	1.4	1.5	1.3	1.1
Syphilis)	0.2	0.1	_		0.1
Rhesus incompatibility	} 2.3	24	0.1	0.5	0.9	0 ·6
Other causes	}	2.1	1.3	1.5	1.8	1.9
Intra-natal causes:						
Breech presentation	1.8	0.7	0.5	0.5	0.8	0.7
Other causes	4.6	3.7	4.1	3.5	4.9	4.3
Post-natal causes:						
Infections	3.6	3.1	3.1	2.4	3.1	3.1
Other causes	1.8	2.0	1.5	2.0	1.4	1.6
Foetal abnormality	5.4	5.3	4.2	3.8	3.3	3.1
Prematurity only	8.2	7.2	5.8	5.9	4.7	4.0
Total	30.0	25.6	22.1	21.6	22.2	20.5

The death rates from toxæmia, fœtal abnormality and prematurity continued to fall, while deaths from other causes fluctuate from year to year.

An analysis of the age at death for the same group of cases is shown below:—

NEO-NATAL DEATHS, 1947. AGE AT DEATH (Birmingham births occurring in Birmingham)

Age at Dec	ath	1	Per cent. of	deaths.	Per cent. of live births	
Less than 24 ho	urs	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		0.9		
24-48 hours			10.5 >	76.4	0.2 > 1.6	
48 hours to 1 w	eek		24⋅5 ∫		0.5 ∫	
1—2 weeks				10.9	0.2	
2—3 weeks				7.4	0.2	
3—4 weeks				5.3	0.1	
ll ages to 4 weeks			1	100.0	2·1	

Death Rate-4 weeks to 1 year.

The death rate in this age period shows a slight rise due mainly to a slight increase in the death rate from respiratory disease and gastro-enteritis.

		Dec	ith rate per			Deat	h rate per		
		1,00	0 live births		1,000 live				
1940 -			41.2	1944			19.8		
1941			39.9	1945			26.5		
1942	••••	′	25.9	1946		••••	17.9		
1943			29.3	1947			19.5		

Legitimacy

The illegitimate infant mortality rate per 1,000 illegitimate births was 64, whilst the corresponding rate for legitimate births was 39.

	Legitimate Infant Death rate	Illegitimate Infant Death rate		Legitimate Infant Death rate	Illegitimate Infant Death rate
1940	70	69	1944	41	62
1941	69	75	1945	49	56
1942	54	83	1946	39	54
1943	56	52	1947	39	64

The main causes of death in illegitimate infants compared with legitimate infants is shown in the following table:—

				Rate per	1,000	
			Legit	imate	Illegitimate	
			live b	irths	live b	irths
			1946	1947	1946	1947
Infectious disease			1.7	1.0	1.2	1.2
Tuberculosis			0.4	0.3	0.6	
Respiratory disease	••••		7.1	8.3	16.8	14.5
Diarrhoea and enteritis	····	••••	5.6	6.5	14.2	15.3
Congenital malformation	ons		4.8	5.1	1.9	5.3
Premature birth	••••		7.5	5.6	11.6	10.7
Atrophy, debility, m	arasmus	and				
atelectasis		••••	2.1	2.5	4.5	3.8
Injury at birth			4.5	4.7	3.2	5.3
Other causes		••••	4.3	5·1	12.2	7.6

Infant Mortality in Wards

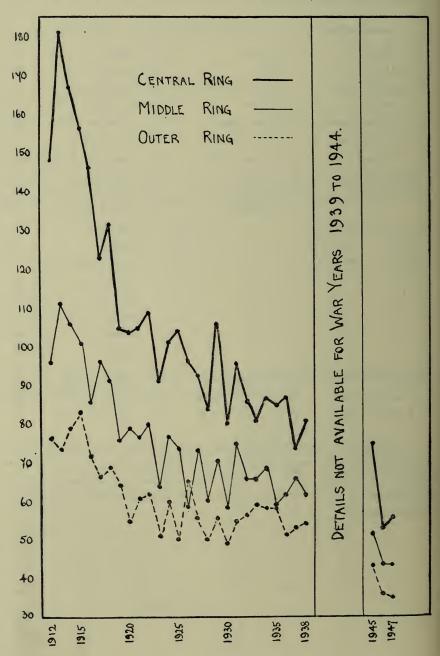
The appended table shows the infant mortality rate in each of the wards of the City in 1947. The average mortality in the groups of wards ten years ago is given for comparison.

Central Wards		Middle Ring		Outer Ring	
St. Paul's	52	Lozells	37	Soho	36
St. Mary's	52	Aston	48	Sandwell	29
Duddeston and		Washwood Heath	32	Handsworth	24
Nechells	57	Saltley	44	Perry Barr	34
St. Bartholomew's	42	Small Heath	34	Erdington	34
St. Martin's and		Sparkbrook	47	Gravelly Hill	48
Deritend	52	Balsall Heath	61	Bromford	44
Market Hall	87	Edgbaston	25	Stechford	34
Ladywood	62	Rotton Park	40	Yardley	49
		All Saints'	57	Acock's Green	30
				Hall Green	19
				Sparkhill	33
				Moseley and King's	5
				Heath	28
				Selly Oak	35
				King's Norton	42
				Northfield	39
				Harborne	40
Average in 1047	E.C.	Arranaga in 1047	43	Average in 1947	35
Average in 1947	56	Average in 1947	43	Average in 1947	36
Average in 1946	53	Average in 1946		Average in 1946	52
Average in 1936	87	Average in 1936	62	Average in 1936	52

The following diagram shows the fall in infantile mortality in each of the three groups of wards during the past 36 years. The rates for the war years are not shown as during that time, because of various reasons, the information at our disposal was not such as to enable us to arrive at accurate figures.

Infant Mortality Rates

BIRMINGHAM INFANT MORTALITY RATES IN GROUPS OF WARDS



Infant Death Rate and Stillbirth Rate according to Welfare Centre Districts

The following table shows the infant death rate and still-birth rate according to welfare centre districts. Although the numbers involved are comparatively small, the trend is of interest.

		Infant	death rate	Stillbi	rth rate
		1946	1947	1946	1947
Tennal Road		 17	47	16	7
King's Heath		 21	29	21	16
Tower Hill		 20	18	23	12
Stirchley		 23	42	24	28
Bromford		 34	42	15	25
Handsworth		 35	36	.15	20
Selly Oak		 20	27	30	25
Acocks Green		 32	27	20	26
Kingstanding		 30	44	24	17
Northfield		 36	39	19	26
Horrell Road		 32	25	24	21
Washwood Heath	1	 38	45	23	20
Hay Mills		 36	37	25	22
Treaford Lane		 34	28	. 28	15
Greet		 36	28	29	27
Weoley Castle		 47	37	21	15
Harborne		 33	23	35	37
Carnegie		 45	41	24	20
Erdington		 41	27	28	28
Floodgate Street		 35	40	34	20
Kettlehouse		 42	38	27	40
Stratford Road		 43	47	26	18
Lansdowne Stree	t	 50	40	20	24
Trinity Road		 45	25	25	20
Sutton Street		 45	54	27	37
Monument Road	•	 50	48	24	30
Yardley Wood		 39	27	35	16
Lancaster Street		 53	48	25	20
Hope Street		 55	50	26	27
Lea Hall		 61	39	20	16
Langley Road		 50	40	32	22
Irving Street		 54	63	30	15

For the purpose of comparison of the districts with the lowest and highest infant death and stillbirth rates, the five lowest have been grouped together (Group I) and the five highest (Group II). The following table brings out the salient differences:—

G								
			G	ROUP I	[
	Infant	Neo-		Respir-	Diarrhoed	Premat-	Birth	Congen-
Total	Mort-	natal	Still-	atory	and	urity	Injury	ital
Live	ality	Death-	birth	Death-	Enteritis	Death-	Death-	Malform-
Births.	Rate.	Rate.	Rate.	Rate.	Death	Rate.	Rate.	ations.
					Rate.			
4,064	25	14.5	15.7	6.6	2.7	3.7	$3 \cdot 9$	$4\cdot 2$
			G	ROUP I	I			
4,221	50	21.3	30.3	10.9	12.6	$6 \cdot 2$	$4 \cdot 0$	6.6

Maternal Mortality in Childbirth

The deaths of women classed to pregnancy and child-bearing in Birmingham during 1947 gave a maternal mortality rate of 0.98 per thousand live and still births. If deaths from abortion are excluded the rate is 0.73 per thousand live and still births. The equivalent rates based on live births only are 1.00 per 1,000 live births, including abortion and 0.75 excluding abortion.

		Rate per	1,000		Rate per 1,000				
		live and sta	illbirths			live and sti	llbirths		
		(excluding a	bortions)			(excluding a	bortions)		
		E	ngland an	ıd		E	ngland and		
		Birmingham	Wales		B	irmingham	Wales		
1941	 	1.95	2.23	1945		1.21	1.46		
1942	 	1.82	2.01	1946		0.64	1.24		
1943	 	1.35	1.84	1947		0.73	1.01		
1944	 	0.95	1.53						

At the request of the Ministry of Health, a medical enquiry has been made in the case of every maternal death in childbirth during each year since 1929. The opinion so obtained, direct from doctors, midwives and hospitals, makes it possible to classify the deaths more accurately than from the consideration of death certificates only.

	А. В.		as due to pregnances due to associate	-		th				25 13	
			Total			*****		••••		38	
A.	De	aths due	to Pregnancy and	Childb	irth						
	1.	Not as	sociated with a no	tifiable	birth						6
		(a)	Septic abortion						4		
		(b)	Toxaemia						1		
		(c)	Eclampsia	••••					1		
	2.	Associa	ated with a notifia	ble birt	:h						19
		(a)	Sepsis						4		
		(b)	Toxaemia:								
			Eclamptic					••••	1		
			Non-eclampt	ic					3		
		(c)	Haemorrhage:								
			Post Partum						1		
			Cerebral						1		
		(d)	Difficult and abn	ormal l	abour		·				
			Severe Shock						1		
			Paralytic ile				ction		2		
		(e)	Thrombophlebitis	s and e	mbolisn	n	••••		6		
B.	De	aths du	e to associated car	ises	••••	••••	••••	••••		••••	13
			Tuberculosis	•••••	••••				6		
			Heart disease	•••••	•			*****	4		
			Chronic nephritis		••••		*****		2		

Cancer of colon

Estimation of Avoidable Factor

A review of the circumstances of every case of maternal death makes it possible to estimate whether or not there was any avoidable factor and, in this respect, the cases have been classified according to the following table, which includes all maternal deaths except those due to abortion and ectopic gestation.

	TABI	LE I.	Other	
	Sepsis	Toxaemia	Obstetric Causes	Associated Conditions
	(4)	(4)	(13)	(13)
Lack or inadequacy of ante-				
natal care	0	1	3	0
Lack or inadequacy of obstetric				
facilities	0	0	0	0
Lack or inadequacy of specialist				
or hospital treatment	1	0	1	0
Lack of co-operation from				
patient or her friends	0	0	0	1
Safety only by avoidance or				
termination of pregnancy	0	3	0	9
No avoidable factor	3	0	9	3
Total number of cases in which	h one c	or more avoidable fa	ctors	
were present				11
Total number of cases in	which	death apparently	was	
inevitable				15

Comparison with previous Years

A comparison of the death rate figures in the principal groups with those of previous years is shown hereunder:—

			Death-ra	te per 1,000	Live and	Still births.		Due to
					Haemorr-	Other		As sociated
	A	bortion.	Sepsis.	Toxaemia.	hage	Causes.	Total	Conditions.
1942		0.52	0.57	0.68	0.16	0.41	2.34	0.89
1943		0.34	0.43	0.53	0.19	0.20	1.69	0.34
1944		0.39	0.17	0.35	0.09	0.34	1.34	0.74
1945		0.29	0.29	0.49		$0 \cdot 34$	1.41	$0 \cdot 44$
1946		0.21	$0 \cdot 04$	0.26	and the same of th	$0 \cdot 34$	0.85	0.47
1947		0.16	0.16	0.16	0.08	0.40	0.96	0.52

The following table gives the age grouping of maternal deaths since 1939:—

	ζ	Inder					40 years
	20	years	20-25 yrs.	25-30 yrs.	30–35 yrs.	35-40 yrs.	and over
1939	 	2	4	14	21	7	4
1940	 	1	10	14	8	7	5
1941	 	0	7	12	8	20	5
1942	 	3	13	15	17	12	2
1943	 	2	9	8	11	7	7
1944	 	1	12	10	14	8	4
1945	 	0	5	8	10	10	2
1946	 	2	4	4	6	12	3
1947	 	1	6	7	7	12	5
		12	70	92	102	95	37

PREMATURITY

Premature births (babies with a birthweight of $5\frac{1}{2}$ lbs. or less), born to Birmingham residents were investigated by Dr. Crosse during 1947.

This investigation was made in order to analyse the primary factors leading eventually to stillbirth, or to the infant death among premature infants.

Of the total of 1,920 premature births, 272 were stillborn. The 1,648 live births showed the following weight distribution:—

Up to 2 lbs.	43 babies = 2.6% of the total
2-3 lbs.	114 babies = 6.9% ,, ,,
3-4 lbs.	204 babies=12.4% ,, ,,
4—5 lbs.	600 babies=36.4% ,, ,,
$5-5\frac{1}{2}$ lbs.	687 babies=41.7% ,, ,,

Incidence

Premature babies formed 7.9 per cent. of all births, live and still, and 6.9 of live births only. They formed a higher proportion of the still-births than usual. The incidence of premature births in the various categories of births and deaths is given below for the years 1943/47.

Incidence of premature birth as a percentage of:

			1943	1944	1945	1946	1947
Total birth rate		 	6.0	6.3	7.2	7 ·9	7 ·9
Stillbirth rate	••••	 	41.4	44.2	44.8	41.3	47.1
Live birth rate		 	5.4	5.4	$6\cdot 2$	7.1	6.9
Neo-natal death r	ate	 	58.7	59.3	59.2	54.2	56.9
Death rate 1—12	months	 	_	_			16.5
Infant mortality	ate	 	_	_	_		34.4

The percentage relating to the death rate 1-12 months and the total infant mortality rate are not available for the years 1943-46.

Mortality

The mortality rates from the different causes of death are given below for (1) the premature births, and (2) babies weighing over $5\frac{1}{2}$ lbs. at birth, the latter being added for comparison so that the true hazard of prematurity can be realised.

Stillbirths STILLBIRTH RATE BY CAUSE OF DEATH FOR PREMATURE BIRTHS AND BABIES OVER $5\frac{1}{2}$ LBS.

Causes of death		Premature deaths (per 1,000 Premature births, live and still)	Deaths of babies over $5\frac{1}{2}$ lbs. (per 1,000 births over $5\frac{1}{2}$ lbs. live and still)
Ante-natal deaths:			
(a) Known causes:			
Toxaemia		21.9	0.7
Syphilis		1.6	-
Rhesus incompatib	-	3.1	0.1
Other maternal con	nditions	$2 \cdot 6$	0.3
Separation of place	enta	3.6	0.2
Foetal deformity .		10.4	$0 \cdot 4$
Other conditions .		7.3	0.6
(b) Unknown	·····	32.3	1.5
Total ante-natal deaths .		82.8	3.8
Intra-natal deaths:			
(a) Ante-natal causes:			
Toxaemia .		$g \cdot g$	$\gamma = 0.5$
Syphilis		_	} 0·1
Rhesus incompatib	ility	_	J
Other maternal cor	nditions	1.6	0.1
Separation of place	enta	3.6	0.2
Foetal deformity .		17.2	0.8
(b) Intra-natal causes:			
Breech presentation	n	12.0	2.5
Difficult labour		3.1	3.2
Other		6.8	1.4
(c) Unknown	••••	4.7	1.1
Total intra-natal deaths		58.9	9.9
Total stillbirth rate		141.7	13.7

The greater proportion of stillbirths occurring before the onset of labour are classed as premature births because they weigh $5\frac{1}{2}$ lbs. or less. This is not, however, a true picture of the cause of stillbirth in these cases which is, in fact, due to the ante-natal causes shown in the table above.

On the other hand, the increased risk of death during labour from intranatal causes is a result of the prematurity, due to a greater chance of breech presentation, more risk of cord complications and a greater susceptibility to intracranial birth injury.

Infant Mortality Rate

For 1947 the infant mortality rate was 214 per 1,000 premature births and 27 per 1,000 babies born weighing over $5\frac{1}{2}$ lbs.

Neo-natal Mortality

NEO-NATAL DEATH RATES FOR PREMATURE BABIES AND BABIES OVER $5\frac{1}{2}$ LBS.

Cause of deat.			(<i>p</i>	nature deaths er 1,000 live mature births)	Deaths of babies over $5\frac{1}{2}$ lbs. (per 1,000 live births over $5\frac{1}{2}$ lbs.)		
Ante-natal causes	:						
Toxaemia			****	15.1	0.1		
Syphilis					0.1		
Rhesus incom	npatibi	lity		3.6	$0 \cdot 4$		
Other			•	25.4	0.2		
Foetal deformity		••••	••••	13.9	2.3		
Intra-natal causes	:						
Breech			*****	$6 \cdot 6$	<i>0</i> ⋅2		
Difficult labo	ur			1.2	0.5		
Other causes				27.8	2.0		
Post-natal causes	:						
Infection			,	11.5	2.4		
Other				5.4	1.3		
Prematurity only				57.6	_		
Total neo-natal d	eath ra	ates		168-1	9.5		

As in the case of stillbirths, the greater proportion of neo-natal deaths are classed as premature births because they weigh $5\frac{1}{2}$ lbs. or less but the deaths occurring among premature infants and attributed to ante-natal causes in the table above are, in fact, due to these causes and not to the prematurity as such, which is merely the result of these causes. On the other hand, for the same reason as in the case of stillbirths, the prematurity itself is the direct cause of the greatly increased risk of death from intranatal causes, post-natal causes and prematurity only. During 1947, the risk of neo-natal death was nearly 18 times greater for the premature births than for the baby weighing over $5\frac{1}{2}$ lbs. at birth.

It is of interest to note the age at death of premature babies and infants over $5\frac{1}{2}$ lbs. who died during the first 4 weeks of life:—

	Premat	ure babies	Babies over $5\frac{1}{2}$ lbs.			
Age at death	Per cent. of deaths	Per cent. of live births	Per cent. of deaths	Per cent. of live births		
Less than 24 hours 24—48 hours 48 hours to 1 week	$ \begin{array}{c} 50.9 \\ 12.6 \\ 22.4 \end{array} $	$ \begin{array}{c} 8.6 \\ 2.2 \\ 3.7 \end{array} $	$ \begin{array}{c} 28.7 \\ 7.7 \\ 27.3 \end{array} $ $ 63.7$	$ \begin{pmatrix} 0.3 \\ 0.1 \\ 0.2 \end{pmatrix} $		
1—2 weeks	6.1	1.0	17.2	0.2		
2—3 weeks	5.1	0.8	10.5	0.1		
3—4 weeks	$2 \cdot 9$	0.5	8.6	0.1		
All ages to 4 weeks	100.0	16.8	100.0	1.0		

No less than 50% of the premature infant deaths occur during the first 24 hours after birth and 86% during the first week; while the corresponding figures for babies weighing over $5\frac{1}{2}$ lbs. at birth are 29% and 64%.

The influence of specialised hospital accommodation on the neonatal death rate of premature infants is shown in the following table:—

NEO-NATAL DEATH RATES (per cent) BIRMINGHAM, 1947.

Place of birth and of treatment	Up to 2 lbs.	2—3 lbs.	3—4 lbs.	4—5 lbs.	5—5½ lbs.	All weights to 5½ lbs.
*Born and treated in "Sorrento"	2(2)	8(5)	30(8)	72(4)	71(2)	183(21)
(Premature Unit)	deaths	deaths	deaths	deaths	deaths	deaths
(183 babies, 71 over 5 lbs.)	100%	62.5%	27.0%	5.5%	2.8%	11.4%
Born and treated in other hospitals	25(22)	72(53)	94(38)	277(24)	348(28)	816(165)
(816 babies, 348 over 5lbs.)	88.0%	73.6%	40.4%	8.7%	8.0%	20.2%
Born at home, 487 treated at home, 110 at Sorrento						
and 52 at other hospitals	16(16)	34(23)	80(23)	251(18)	268(11)	649(91)
(649 babies, 268 over 5 lbs.)	100%	67.7%	27.6%	7.2%	4.1%	14.0%

*For 1,256 infants born and treated in Sorrento from 1931-46, the neo-natal mortality rates were as follows:—

Up to 2 lbs.	 100%	4—5 lbs	 9.5%
2—3 lbs	 70%	5—5½ lbs	 1.3%
3—4 lbs	 30%	Total for the whole group	 11.4%

Death rate from 1-12 months

Deaths over 4 weeks have also been divided into premature babies and those over $5\frac{1}{2}$ lbs. at birth; and the following table shows the relative risks of death from each important cause for the two groups.

DEATHS OVER 4 WEEKS AND UNDER 1 YEAR, 1947

Cause of dea	t h			(Ra	emature babies ite per 1,000 Premature ive births)	Babies over $5\frac{1}{2}$ lbs. (Rate per 1,000 live births over $5\frac{1}{2}$ lbs.)
Infections:					,	- '
Respiratory					15.2	7.0
Digestive					14.0	4.5
Other	••••				7.8	3.0
Foetal deformity					7.3	1.9
Prematurity only					0.6	
Other causes					1.2	1.1
Total death rate	4 wee	ks—1 y	ear		46·1	17.5

This table shows that the relatively high death rate from infections continues in premature infants even after the first 4 weeks of life. The high death rate from deformities in premature infants is due to the high incidence of prematurity in cases of deformity; the prematurity being the result, and not the cause, of the deformity.

The Present Situation in Birmingham

The fcetal, neo-natal and infant mortality rates could all be reduced (1) if the incidence of prematurity could be reduced, and (2) if more premature infants could be saved. The cause of the prematurity is obscure in about 50% of cases; in the other 50% abnormalities of pregnancy play a large part. Good ante-natal care is therefore regarded as the sheet anchor in the reduction of the incidence of prematurity. For this reason more ante-natal beds are required in Birmingham.

For the reduction of mortality in the premature baby, specialised nursing care and hospital accommodation are required. In Birmingham, a Premature Unit was set up in 1931, but the number of cots for premature babies is inadequate for the number born and more are to be provided shortly.

In order to improve the standard of the care of the premature baby in its own home, district midwives are trained in the care of premature babies and premature cots, clothing and equipment are provided for their use by the local authority. The following table shows the history of the 1,560 premature babies born alive in Birmingham during 1946 and reaching the age of one year during 1947:—

FOLLOW-UP TO 1 YEAR. 1,560 PREMATURE BABIES BORN IN 1946

							All
		Up to	23	3—4	45	551	
		2 lbs.	lbs.	lbs.	lbs.	lbs.	to $5\frac{1}{2}$ lbs.
(1)	Births Per cent. of total	42	93	227	555	643	1,560
	births	2.7	6.0	14.5	35.6	41.2	100.0
(2)	Neo-natal deaths	42	72	80	54	22	270
	Per cent. of births	100.0	77.4	35.2	9.7	3.4	17.3
(3)	Alive at 4 weeks		21	147	501	621	1,290
(4)	Left City		1	7	28	39	75
(5)	Untraced at 1 year			1	17	22	40
(6)	Traced to death or 1 year	_	20	139	456	560	1,175
(7)	Died after 4 weeks						
(-)	and before 1 year	_	1	16	31	20	68
	Per cent. of 6	_	5.0	11.5	6.8	3.6	5.8
(8)	Alive at 1 year	_	19	123	425	540	1,107
(9)	Abnormalities found in children alive at 1 year		Mongol 1 eye defect	2 heart 2 defects 1 talipes	1 eye	mute de	

Puerperal Pyrexia and Puerperal Sepsis

The following table shows the number of cases of puerperal pyrexia during 1947 and the preceding 4 years.

The out-of-city cases are those not normally resident in Birmingham, but coming into the City for confinement.

	19	43. 1944.	. 1945	. 1946.	1947.
Total puerperal pyrexia cases	3	96 352	338	310	244
Out-of-City cases	2	25 20	32	13	38
Birmingham cases	3	17 332	306	297	206

Detailed information is obtained in nearly all the Birmingham cases, and is shown in the following tables:—

		1943	1944	1945	1946	1947					
Number of cases invest	igated	371	332	306	297	193					
Primiparae		168	156	152	171	104					
Multiparae	·····	123	128	117	96	69					
Parity not stated	••••	80	48	37	30	20					
Abortions		55	26	28	21	13					
Transferred to hospital for treat-											
ment		127	111	84	85	69					
Already in hospital		153	117	117	127	75					
District nurse		7 3	67	66	51	46					
Midwife or relative		4	6	10	10	6					
Not known		10	_	_	1	6					
Consultant called in		4	5	1	2	_					
Deaths: (a) Childbirth	h	5	5	4	2	3					
(b) Abortion		1	_	1	1						

The ante-natal care in the 206 Birmingham cases of puerperal pyrexia in 1947 was as follows:—

Sufficient ante-n	atal ca	re		 				166
Insufficient ante	-natal	care		 		••••	••••	10
Not stated				 				17
Abortions		••••	••••	 	••••			13

206

The 206 Birmingham cases of puerperal pyrexia have been analysed as far as possible, with a view to discovering the cause of the pyrexia.

The suggested causes are as follows :— $\,$

(1)	Due to infection of the geni	tal tract				100 (48.5%)
	Uterine infection 4	2	Perineum infec	tion	11	
	Subinvolution 1	6	Puerperal sepsi	.s	2	
	Septic abortion 1	3	Interference		1	
	Retained products 1	5				
(2)	Due to extra-genital causes			,	•	99 (48·1%)
	Urinary	9	Pleurisy		1	
	Pneumonia	4	Gastro-enteritis	5	1	
	Respiratory 2	4	Thrombo-phleb	itis		
	Mastitis 2	0	of leg		2	
	Measles	1	Tonsillitis		1	
	Influenza	3	T.B		5	
	Mumps	1	Pyelitis		9	
	Chill	1	Bronchitis		2	
	Anaemia	2	Pulmonary em	bolism	1	
	Toxaemia	1	White leg		5	
	Psychological	1	Post operation			
	Reaction to overwork	1	reaction		2	
	Colitis	1	Cardiac failure	(died)	1	
(3)	Causes not brown					7 (3.4%)

Ophthalmia Neonatorum

During the year there were 815 cases of ophthalmia neonatorum notified, of which 13 were treated in hospital. Only a very small proportion of these were due to gonococcal infection, and no impairment of vision occurred in any case reported to the department.

Pemphigus

Number of cases of pemphigus	which	occuri	red on t	he dist	rict du	ring			
1947							14		
Admitted to hospital							2		
Nursed at home :									
(a) by district nurse		••••	••••		••••	****	5		
(b) by relative		•	••••		••••	****	7		
Number of cases of pemphigus which occurred in institutions during									
1947				••••			1		

All cases of pemphigus which occurred during 1947 recovered.

MATERNITY SERVICES

The births occurring in the City during the year were as follows:—

	•	Still
	Live	Births
Births notified	24,909	702
Failed to notify	215	
	25,124	702

Total: 25,826*

*This figure represents 25,437 confinements and does not include births to Birmingham residents which occurred outside the City, nor births in St. Chad's Hospital which only admits persons from outside the City boundary; but it does include the births to a number of women whose residence was outside the City. It includes 385 sets of twins (338 sets both living, 40 sets 1 living and 1 stillborn, 7 sets both stillborn), and 2 sets of triplets (1 all living and 1 with two living and 1 stillborn).

This figure shows an increase of approximately 1,500 births over the number dealt with in 1946, yet the total number of midwives notifying their intention to practise in the City fell by 33. The fall was greatest among the institutional midwives where 29 fewer notified their intention to practise, yet they had to deal with 807 more confinements. On the other hand, in the domiciliary service there was only a fall of 4 midwives, but they had to deal with 753 more confinements than in 1946. In addition, the domiciliary service had to carry a heavier load, as owing to the pressure on maternity beds in institutions, it was found necessary at certain periods to discharge maternity cases before the tenth day after delivery. In these cases, daily visiting was carried out by the City midwives until the fourteenth day, 2,957 such visits being paid to mothers.

Medical practitioners were engaged in $18\cdot1\%$ of the cases and were called in to assist at the confinement in $4\cdot5\%$. Midwives alone attended $76\cdot1\%$ of confinements in patients' homes. $52\cdot4\%$ of all the confinements in the City occurred in institutions. These figures are set out in detail as follows:—

DOMICILIARY CONFINEMENTS

Doctor Delive	elivery by r booked red by a	y midw for con mbulan		s) ` 		.	for a	 9,735 2,214 160 116
								12,225
		TATO	TITIITIAN A	CON	TOTATO	AT STOR		
		INS	TITUTIONAL	. CON	FINE	MENT	S	
Total	confinem	ents in	Nursing Home	es				 1,985
**	,,	,,	General Hosp	ital				 63
,,	,,	,,	Hope Lodge					
,,	,,	,,	42, Park Hill		••••			 39
,,	,,	,,	H.M. Prison					 8
,,	,,	,,	Queen Elizabe		-			 474
,,	,,	,,	Sorrento Mate	ernity	Home			 1,925
,,	,,	,,	Heathfield Ro	oad Ma	ternity	Home	е	 991
,,	,,	,,	Erdington Ma	ternit	y Home	•		908
,,	,,	,,	Lordswood M	aternit	ty Hom	e		 851
,,	,,	,,	Maternity Ho	spital				 2,042
,,	,,	,,	Women's Hos	pital				 1
,,	,,	,,	Dudley Road	Hospi	tal			 3,204
,,	,,	,,	Selly Oak Hos	spital				 822
,,	,,	,,	Little Bromw	ich Ho	spital			 2
	Tota	al confi	nements in Ins	stitutio	ons			 13,315
			Total					 25,540

DOMICILIARY MIDWIFERY SERVICE

At the end of 1947, 124 City midwives were in practice, 13 midwives were employed as maternity nurses and 24 independent midwives were in practice, including 4 who resided outside the City. Two midwives attached to the former Queen's Hospital worked on the district. The Queen's Hospital district was taken over by the City Service in October, 1947. Fourteen ambulance midwives were employed by the Birmingham Hospital Contributory Association.

During the year there were 12,225 women delivered in their own homes, 11,368 by City midwives, 116 by midwives attached to the former Queen's Hospital and 581 by private midwives. There were 160 confinements attended in patients' homes or in ambulances by ambulance midwives.

City Midwives

During the year, City midwives attended 11,368 cases and acted as maternity nurses in 1,918 of these cases.

The average number of deliveries for each midwife per month was 7.5 or 90 cases in the year. This makes no allowance for 198 weeks lost by sick leave. There have been 28 new appointments to the service and 19 resignations during the year.

Supervision of Midwives

During the year 353 midwives notified their intention to practise in the City. Of these, 4 resided outside the City and therefore did not come under routine inspection. Of the total number of 353 midwives, 169 were institutional and 184 domiciliary.

Midwives sent for medical aid in 3,809 cases, in 2,612 instances for treatment for the mother and in 1,197 for the child.

Reasons for sending for medical help

MOTHERS		CHILDREN
Delayed labour	544	Ophthalmia 839
Laceration of perineum	1,228	Prematurity 55
Haemorrhage	167	Convulsions 2
Adherent placenta	63	Jaundice 20
Abnormal presentation	107	Skin eruption 47
Abortion or miscarriage	33	Deformity 32
Rise of temperature	130	Other causes 202
Other causes	340	
	2,612	1,197
Midwives were tempor	orarily	suspended for the following reasons:-
Septic conditions	11	Skin conditions 2
Accidents	6	Bronchitis 1
Influenza	6	Other causes 27
Colds	4	

The following visits were paid during the year by the Supervisors of Midwives:—

Routine visits to midwives			 	 	114
Special visits to midwives					269
Visits to stillbirths					57
Visits after neo-natal deaths					79
Nursings and deliveries supe	rvised		 		80
Visits to ophthalmia neonato	orum c	ases		 	1,575
Visits to puerperal sepsis cas	ses			 	190
Other visits				 	647
Unsuccessful visits				 	584
Number of interviews with r	nidwiv	es		 	1,116
Hospital interviews (materni	ty boo	kings)			6,270
Interviews re dockets for she	eets				5,974

Emergency Maternity Service

This is a service whereby a doctor and a nurse from the Maternity Hospital proceed to the patient's home by ambulance with equipment for the treatment of shock and hæmorrhage.

In addition to this, one of a panel of consultants can be summoned by the general practitioner if he considers this advisable. This service was used in 83 maternity cases in the City, the reasons being as follows:—

J		,			 	
Post partum haemorrhage				·	 	27
Post partum haemorrhage	and retain	ned pla	centa		 	43
Abortion					 	6
Severe obstetric shock					 	4
Ante-partum haemorrhage					 	1
Haematoma					 	1
Obstructed labour and clei	dotomy				 	1
						83

Eleven of these cases were transferred to hospital for further treatment.

Gas and Air Analgesia

The number of municipal midwives who have their gas and air certificate is now 106. Sixty-one sets of gas and air apparatus are in use in the service. During 1947, 324 patients received gas and air anæsthetic administered by a municipal midwife in the domiciliary practice.

Premature Baby Equipment

Sixty premature baby outfits are available at midwives' houses. The full equipment has been loaned out to patients in 16 instances and part equipment has been loaned in 21 instances.

Training of Midwives

The City Hospitals (Dudley Road and Selly Oak) and the City Maternity Home, 15, Wake Green Road, Moseley, together with the Birmingham Maternity Hospital, are recognised for the first period of training; while the City Maternity Home, Heathfield Road, Handsworth and Lordswood Maternity Home, Harborne, are recognised for the second period of training.

District Training

During the year 1947, 20 teacher midwives were taking pupils on the district. Four midwives were approved as teachers during the year and two teachers resigned.

Ğ		ained for the Aidwives' Boar	d Obtained
	Cert	ificate	Gas and Air
	Part I	Part II	Certificate
Selly Oak Hospital	 39	_	12
Dudley Road Hospital	 55		5
Birmingham Maternity Hospital	 86		
Sorrento Maternity Home	 31		14
Heathfield Road Maternity Home	 	77	40
Lordswood Maternity Home	 _	35	12

INSTITUTIONAL MIDWIFERY

There are six maternity units under the control of the City Council. The work undertaken at Dudley Road Hospital is referred to on page 12 and that at Selly Oak on page 19

City Maternity Home (Sorrento), Wake Green Road, Moseley. (112 Beds).

This Home is a training school for pupil midwives. (First part of training).

Including the annexe in Greenhill Road, this Institution has 64 lying-in beds, 30 ante-natal beds and a premature baby unit with cots for 14 babies and beds for 4 mothers.

The number of deliveries in the Home during 1947 was 1,935; of these, 1,689 were booked and 236 unbooked cases. Sixty-two per cent. were primigravidæ. There were five cases of notifiable pyrexia. Two mothers died; one from pulmonary embolism and the other from tuberculosis.

Of the 241 babies admitted to the premature baby unit, 60% were unbooked cases admitted after delivery in their own homes. The mortality rate for all prematures born in the Home, whether treated in the special unit or not, was $11\cdot4\%$.

The mortality rate of these 241 babies was 22%, which was low considering the very great proportion of small infants (the larger ones being treated at home).

City Maternity Home, Heathfield Road, Handsworth. (43 Beds).

This Home is a training school for midwives. (Second part of training). Including the annexe at Bourne House, the Institution has 33 lying-in beds and 10 ante-natal beds.

The number of deliveries in the Home during 1947 was 1,001; of these 863 were booked and 138 unbooked cases. Seventy per cent. were primigravidæ. Nine cases of notifiable pyrexia occurred. There were no maternal deaths.

City Maternity Home, Lordswood Road, Harborne. (27 Beds).

This Home is primarily intended for women who have had a previous child but require institutional treatment because of home difficulties. It is a training school for pupil midwives (second part of training).

Ante-natal and post-natal clinics in connection with this Home are held at the Harborne Welfare Centre in Wentworth Road. There are no ante-natal beds, but abnormal ante-natal cases are dealt with by either the Wake Green Road or Heathfield Road Homes. During 1947 there were 877 deliveries. These were all booked cases and eighty per cent. were multigravidæ. Five cases of notifiable pyrexia occurred and there were two maternal deaths, one from pulmonary embolism and the other from cardiac failure (rheumatic endocarditis and myocarditis).

City Maternity Home, Highcroft Hall, Erdington. (32 beds).

This Home is also primarily intended for multigravidæ with home difficulties.

Ante-natal and post-natal clinics in connection with this Home are held at the Erdington Welfare Centre in Marsh Lane.

During 1947, 933 women have been delivered, sixty-nine per cent. being multigravidæ. Fourteen cases of notifiable pyrexia occurred. There were no maternal deaths.

MOTHERS

	Sorrento	Heathfield	Lordswood	Erdington
No. of confinement	ts 1,925	1,001	877	933
Booked	1,689	863	877	933
Unbooked	236	138	_	_
Primigravidae	1,202	709	179	192
Multigravidae	723	292	689	741
Forceps	84	52	23	35
Notifiable pyrexia	5	9	5	14
Maternal deaths	2		2	-
		INFANTS		
	Sorrento	Heathfield	Lordswood	Erdington
Births	1,957	1,023	890	941
Stillbirths	68	33	22	9
Booked	36	24 22		9
Unbooked	32	9	_	_
Deaths under 10				
days	36	17	7	6
Booked	27	14	7	6
Unbooked	9	3		
Premature births				
$(5\frac{1}{2} \text{ lbs. or less})$	196	104	26	38
Booked	138	76	26	38
Unbooked	58	28		_
Stillborn	23	14	9	1
Died	20 = 11.5%		2 = 11.8%	3 = 8.1%
	of those bo	rn alive.		
Feeding:				
Breast only	1,616	872	806	890
Complemented	192	56	46	32
Artificial	45	46	9	4

Ante-natal

Po

CLINICS.

	Sorrento	Heathfield	Lordswood	Erdington
Doctors' Clinics:		·		
New patients	1,726	1,153	943	927
Re-visits	7,958	2,917	3,095	2,331
Consultation only	1,396	419		_
Midwives' Clinics	633	1,549	483	_
ost-natal				
New patients	1,191	465	419	190
Re-visits	428	455	139	12
Consultation only	129	85		_

Laboratory Examinations

One whole-time bio-chemist is employed to undertake work in connection with the four maternity homes. The following is an analysis of the work done:—

				No. of e	xaminations
Haematology	 •	 	 		5,739
Urine tests	 	 	 		1,547
Urea clearance	 	 	 		69
Single urea test	 	 	 		16
Yeast fermentation	 	 	 		34
Sugar tolerance	 	 	 		14
Single sugar test	 	 	 		2
Gastric analysis	 	 	 		6
Van den Bergh test	 	 	 		2

Post-mortem Examinations

As part of the arrangements organised through the Child Health Institute, post mortem examinations were carried out by the pathologist at the Children's Hospital. The following is a list of post mortem examinations performed:—

Sorrento Maternity Home	 	••••	 	98	cases
Heathfield Maternity Home	 		 	43	,,
Lordswood Maternity Home	 		 	18	,,
Erdington Maternity Home	 			11	21
		Total		170	,,

Tuberculous Cases

The ante-natal care of tuberculous pregnant women was again undertaken by the Senior Medical Officer in charge of Sorrento Maternity Home. Regular visits were made to patients in Yardley Green Sanatorium, West Heath Sanatorium and Salterley Grange Sanatorium. Fifteen patients were visited; 10 of these were transferred to Sorrento Maternity Home

for delivery and later returned to the Sanatorium. Five were visited for ante-natal care only. In addition, 10 out-patients suffering from tuberculosis were delivered at Sorrento and one home visit was made to a patient who was unable to attend the ante-natal clinic.

Inspection and Registration of Nursing Homes and Nurses' Agencies

Nursing Homes

At the end of 1947, there were 38 nursing homes on the register. Five new homes opened during the year, two for maternity with eight and five beds respectively, and three for chronic medical cases with a total of 35 beds. One maternity home has changed ownership. Three homes closed during the year, one for six maternity beds and two for chronic medical cases, of nine and fifteen beds respectively. One combined maternity and medical home has closed its maternity unit of five beds.

The total number of visits paid to nursing homes during the year 1947 was 127 (106 by Medical Officers and 21 by Supervisors of Midwives).

Total number of beds in homes		 408
No. of homes which are equipped for surgical work		 4
No. of homes which take chronic or senile cases only		 16
No. of homes which take maternity cases only		 18*
No. of homes which keep some beds for maternity cases		 2†
* With 120 beds. † With 6	beds.	

Nursing Agencies

In accordance with the Nurses' Act of 1943 and the Nurses' Agency Regulations, 1945, applications were received from six Agencies and renewals of licences were granted in each case. Thirteen visits of inspection were paid.

HEALTH VISITORS' TRAINING COURSE, 1947-48

The twenty-fifth course of training for the Health Visitors' Certificate commenced on Monday, 1st September, 1947.

The response to the advertisement for students again showed some improvement. Eighty-five completed applications were received and 28 Birmingham students were appointed. Groups of candidates attended the Training Centre to write the preliminary test at regular intervals throughout the six months prior to the meeting of the Selection Committee. The eleven local authorities in the Region participating on the training scheme received 33 completed applications and 22 students were selected for training, making a total of 50 students in training.

With the increased number of local authorities offering facilities for practical training, it has been possible to arrange for each student to gain experience in the Public Health Departments of two urban authorities

in addition to experience in a rural area. The students have very much appreciated this wider experience which they have found both interesting and instructive.

The Social Science Department of the University have extended an invitation to the Student Health Visitors to take part in their discussion groups which are held weekly in the Training Centre. It is felt that an exchange of views on different aspects relating to subjects of mutual interest make a valuable contribution to the training of students.

Dr. U. Cox, Medical Officer to the Carnegie Infant Welfare Centre, has retired as lecturer to the Student Health Visitors. Dr. Cox has been associated with the Training Course for many years. She has been succeeded by Dr. V. M. Crosse.

Lectures on mental deficiency are now given by Dr. J. E. Greener.

Forty-eight students entered for the examination in April, 1947. Forty were successful. All the students who failed have now successfully passed the examination.

HEALTH VISITING SERVICE

The visited child population again shows an increase, on this occasion of 4,651 on the previous year.

	Number of	Number of Health Visitors
	visited	engaged whole-time on Maternity
	children	and Child Welfare work
Year	Dec. 31st.	Dec. 31st.
1938	69,698	95
1939	70,289	95
1940	67,826	96
1941	65,259	97
1942	70,008	97
1943	75,310	98
1944	82,839	99
1945	86,935	98
1946	93,572	103
1947	98,223	111
Total number of ro	utine visits paid to child	ren under 5 years 261,408
	ecial visits paid to child:	
	sits to expectant mother	10.001
Total number of v	visits post-natally follow	ving ophthalmia, still-
births and neo-		1,582
	sits to scabies, home hel	ps and neglect cases 4,440
Total number of fru		62,248
		362,759

As a result of the increased number of health visitors the average case load per health visitor in December shows a very slight decrease on 1946, although the total visited child population has increased.

The position as regards the case load per visitor over the last 10 years is as follows:—

	Ν	To. of			No. of	
	Heal	th Visitors	Case		Health Visitors	Case
Year	engo	aged solely	Load on	Year	engaged solely	Load on
	at M	aternity and	Dec.,		at Maternity and	Dec.,
	Child	l Welfare	31 <i>st</i> .		Child Welfare	31st.
	C	entres			Centres	
1938		95	733	1943	98	766
1939		95	739	1944	99	834
1940		96	706	1945	98	887
1941		97	661	1946	103	908
1942		97	721	1947	111	893

When the ten year period 1938-47 is considered, it is seen that the visited child population under the age of 5 years has increased by 41 per cent. but the number of health visitors employed has increased by only 17 per cent. In consequence, it has been found impracticable to adhere to a uniform scheme of visiting throughout the City. A satisfactory scheme of home visiting would be as follows:—

Under 12 months	 	 	 	13 visits
1—2 years	 	 	 	4 ,,
2—5 years	 	 	 	2 '

On the present visited child population under 5 years this would entail 486,741 routine visits yearly, whereas only 261,408 routine visits were, in fact, paid to children under the age of five years. It was decided, therefore, to evolve a plan of visiting for each welfare centre area adjusted according to the time available for home visiting and the child population to be covered. With this end in view, a staff conference was held at each welfare centre in order to draw up for the area, a visiting plan which there was some possibility of fulfilling. In all cases, priority was given in the plan to visiting children under one.

The diminution in the amount of district visiting has meant that although the total number of children visited shows an increase the average number of visits per child over the age of one year has shown a fall. This is reflected in the centre attendances, which have shown an increase for the infants under one year but in all other age groups have shown a fall. In practically all instances it has proved possible only to visit as follows:—

As soon after the 14th day as possible.

14 days—1 year — Centre-attenders 2 monthly.

Non-Centre-attenders monthly.

During the 2nd year Centre-attenders every 4 months.

Non-Centre-attenders every 3 months.

During the 2nd-5th year Once a year.

The introduction of clerical assistants at the welfare centres has relieved the health visitors of a considerable amount of work, and so has enabled them to give additional time to the more technical side of the work at the centres, and has increased the number of visiting sessions. Part-time clerks are at present engaged at 25 centres for a total of 131 sessions weekly. The remaining centres are fortunate in having sufficient voluntary help.

Full-time clinic nurses are employed at two centres, namely Carnegie and Monument Road. Clinic nurses are giving part-time assistance at the following centres:—

Irving Street, Four sessions.
Kettlehouse, Five sessions.
Lancaster Street, Four sessions.
Lansdowne Street, Four sessions.

Sutton Street, Six sessions. Tower Hill, Five sessions. Trinity Road, Four sessions.

While the employment of clinic nurses is necessary as a short-term policy, they cannot wholly replace health visitors at the clinics. The limitations of their training on the preventive side means that they cannot undertake the important task of individual and group teaching. In consequence, this teaching at the present time is inadequate, in particular at ante-natal clinics; for the individual health visitors who remain in the clinics must, with this dilution of staff, carry more responsibility for the running of the clinic, and in consequence have less time for teaching.

Further, there is the added risk that the health visitors who are thereby relieved of clinic duties may not see the mothers from their district when they attend the clinic, a situation which is disappointing both to the mother and the visitor.

Children Visited in 1947

	-	Nu	mber visited			
Year of Birth			Number	Number attended Centre	% visited children attended	% for corres- ponding groups in 1946
					Centres	
1942						
(Attained						
age of 5						
years in						
1947)				1,586		
1943			17,749	3,233	18.2	19.7
1944			19,573	4,298	21.9	25.7
1945			17,422	5,167	29.6	33.9
1946			20,886	13,407	$64 \cdot 2$	68.9
1947			22,593	18,086	80.0	77.3
,			98,223	45,777		

The total percentage of visited child population (1943-47 age groups) which attended centres during the year was 44.9, a decrease of 3.1% for the same age group in 1946.

Movement of Staff

During the year, twenty visitors left the staff for the following reasons:—

By retirement						 2
Retired on grounds of health					••••	 1
By marriage						 2
By transfer to other local auti	horities	5				
(a) for domestic reasons						 6
(b) for other reasons						 2
By transfer to health visiting	with S	.A.A.F.	A. in A	Austria		 2
To relief work in Germany						 1
By return to hospital work						 1
By return to midwifery work						 3
						20

Twenty-three students were retained for the second year of their contract, and four additional appointments of existing health visitors from outside were made during the year.

Miss M. M. Anderson, who was granted leave of absence, commenced the Mental Health Course at the London School of Economics in October.

Sickness

The health visiting staff have been working under very great pressure throughout the year. This no doubt has had a bearing on the sickness rate which has been high during the year—a total of 2,060 working days has been lost making an average of 19 days per year per health visitor.

The following were the chief conditions responsible:—

Colds, influenza and respiratory catarrh 608 days									
Operations, other than a	abdon	ninal	·				109	,,	
Operations, abdominal							444	,,	
Accidents							238	,,	
Neuritis and fibrositis							226	,,	
Gastritis, etc							58	,,	
Varicose veins							58	,,	
Specific infections (who	ping	cough,	Germa	n meas	les)		58	,,	
Other conditions (include	ling ey	e, ear,	nose	and th	roat, t	eeth,			
feet, debility, etc.							164	,,	
Domestic emergencies							97	,,	
						-			
							2, 060		
						200			

The number of days lost by sickness in

1945 1,260—Average 12 days per health visitor.
1946 1,354—Average 13 days per health visitor.

MATERNITY AND CHILD WELFARE CENTRES

The number of centres provided and maintained by the Council is 32.

Ante-natal Clinics at Child Welfare Centres

The number of clinics held weekly was 88, with an average attendance of 20.9. The number of individual women attending has decreased by 1,227 and the total attendances decreased by 734 when compared with 1946.

Mothers' Attendances at Ante-natal Clinics

			Increase or
	1946	1947	Decrease
Number of ante-natal clinics held	 4,084	4,586*	+502
New mothers booked during 1947	 16,833	15,768	1,065
Total individual women attending	 21,898	20,671	1,227
Total ante-natal attendances	 96,824	96,090	734

^{*} Including 601 midwives' sessions.

Ante-natal clinics are also held at the City Maternity Homes, the Maternity Hospital, Dudley Road and Selly Oak Hospitals, to any of which consultation cases can be referred.

Rhesus Tests

Beginning in January, 1947, tests for the Rh. factor were commenced at four selected centres. In September this test was extended to include all mothers attending the ante-natal clinics for the first time.

Mass Radiography

In December, arrangements were completed for offering mass radiography to all ante-natal mothers attending for the first time.

Post-natal Clinics at Child Welfare Centres

At these clinics the mother receives her own physical examination between the 6th and 8th week after confinement. She is also invited to bring her baby until the infant is three months old.

The total number of primary post-natal examinations and reexaminations at post-natal and ante-natal clinics was 5,180, an increase of 250.

The following table shows the result of these examinations:-

Total number of cases examined	 	 •	5,180
Number of cases showing no abnormality	 	 ••••	2,015
Number of cases showing abnormality	 ****	 ••••	3,165
D			61.1
Percentage of cases showing abnormality			OIL

Abnormal conditions found

Breasts—mastitis	 			54
Genital tract	 			 2,497
Urinary tract	 	 	 	122
White leg	 	 	 	 7
Other conditions	 	 	 •	2,923

(More than one abnormality may be found in the same mother).

Post-natal clinic attendances

			1946	1947
Number held	 	 	 1,445	1,521*

Mothers:

No. of primary examinations			4,591	4,922
No. of re-examinations			339	258
Total examinations			4,930	5,180
Average number of examinations	per con	sultati	ons 3·4	3.4

Infants:

No. of new infants attending	11,535	12,542
Total number of infant attendances	60,771	64,671
Total examinations by doctor	23,533	23,883
Average attendance of infants per consultation	42.0	42.5
Average number of infants seen by doctor per		
consultation	16.3	15.7

(*No doctor attended at 9 of these clinics).

In addition, many post-natal examinations are conducted at the maternity homes and hospitals and by private doctors and in nursing homes.

Attendance of Children at Child Welfare Centres

Total number of attendances at child welfare centres during 1947: -

(1)	By children under 1 year of age					231,947	
-----	---------------------------------	--	--	--	--	---------	--

2) By children between 1—5 years of age 55,024

Total number of children who attended a centre for the first time during the year and who, at the time of their first attendance, were:—

(1)	Under 1	year of age							21,158
-----	---------	-------------	--	--	--	--	--	--	--------

(2) Between 1—5 years of age 2,919

The number of children attending a centre for the first time show an increase of 2,403 for the under 1 and 383 for the 1—5 years old children.

Total number of individual children who attended during the year, and who on December 31st, 1947:—

(1) Were under 1 year of age 18,086 (2) Were between 1 and 5 years of age 26,105 (3) Had attained 5th year of age 1,586

The number of attendances at each type of child welfare clinic is shown in the table below :—

			Increase or
Children's attendances.	1946	1947	Decrease.
Individual children attending	44,888	45,777	+889
Total attendances made at infant			
clinics	179,780	199,804	+20,024
Total attendances by infants at post-			
natal clinics	60,771	64,671	+3,900
Total attendances made at pre-school			
medical inspections:	22,645	22,496	—149
Total children's attendances	263,196	286,971	+23,775

Children's Clinics

Children of any age up to 5 years may attend these clinics, though mothers with babies under 3 months are encouraged to attend the postnatal clinics, and toddlers to attend the toddlers' inspection clinics.

Number of clinics held With doctor attending Without doctor attending	 1946 2,439 1,023	1947 3,318 255	Increase or Decrease +879 768
Total	 3,462	3,573	+111
New children attending Total attendances	 8,583 179,780	9,958 199,804	
Average attendance per clinic Total seen by doctor Average seen by doctor per clinic	 51·9 50,244 20·6	55·9 65,015 19·5	

Medical Inspection of Pre-School Children

These clinics are held for the medical inspection of pre-school children between 18 months and 5 years of age. Quarterly appointments are given and the mother is encouraged to keep these regularly. If more frequent supervision is considered desirable, the mother is advised to bring the child in the interim to the ordinary consultation.

The number of pre-school clinics held during the year was 1,469—an increase of 175 over 1946; the average attendance per clinic was 16, a decrease of 1.5 compared with 1946.

The following table gives an analysis of the attendances and conditions found:—

Section A.

Numbers			Increase or
	1946	1947	Decrease
Number of clinics	1 00 4	1,469	+175
Total attendances	00.000	22,496	-172
Number of children attending for firs		-=, 100	
time at any clinic		1,577	+404
Number of children attending toddlers		1,077	1 20-2
clinic for first time		3,908	
Number with one or more defects		6,809	
Number with adverse environmenta	•	0,000	
conditions		2,691	
Number with acute illness during the		2,001	
	4 5 45	2,110	
year Section B.	. 1,047	2,110	
F		1947	
Cl. 41 in a constitutely and in a decrease			
-		 89	
Rest: bedtime later than 7 p.m.		 3,533	
No day-time rest		 5,986	
Section C.			
Classified defects			
Eyes:		o	
Squint	• ••••	 254	
Inflammatory conditions		 112	
Other eye conditions		 48	
Skin:		4.40	
Eczema	•	 142	
Purulent conditions		 96	
Ear, nose and throat:			
Deafness		 27	
Otorrhoea		 201	
Enlarged or diseased tonsils and/or			
adenoids		 2,490	
Nasal obstruction and/or mouth			
breathing	••••	 384	
Teeth:			
Carious or defective		 1,614	
Glands		 827	
Heart:			
Congenital diseases		 95	
Rheumatic heart conditions		 33	
Anaemia		 108	
Lung conditions		 120	
Rickets:			
Active		 186	
Rachitic deformities	*****	 1,105	
Other deformities	****	 1,195	
Mentally backward		 112	
Speech (backward or defective)		 200	
Other defects		 507	

(More than one defect may occur in the same child).

Ultra-Violet Light Clinics

The ultra-violet light clinics were held until Easter, 1947, and have not since been recommenced, partly owing to the fuel cuts which interfered with the continuous functioning of the lamps during the clinic periods and partly to the need for increasing the number of health visitor home visiting sessions. The number of attendances in the first quarter of the year was 4,851.

Remedial Exercises

The remedial exercises clinics have suffered slightly on account of the changes of staff. The clinics previously taken by Miss Nicholls, who left on December 31st, 1946, after one year's service, were suspended until February, 1947. When Miss Rowe was appointed, classes were again opened on the north and east side of the City and four sessions held at Canwell Hall. Unfortunately, Miss Rowe left in October and, as no successor could be found, her classes had to be closed down. The two part-time physiotherapists continued to give us 10 sessions weekly.

Individual children attending		 	690
Number of sessions held		 	370
Total attendances	••••	 	5,284
Average attendances per session		 	14.3

Dental Treatment

Two part-time specialist anæsthetists were appointed during the year.

			Carnegie Institute	Stratford Road	Lancaster Street	Selly Oak	Total.
Number of clinics he	ld		251	208	151	36	646
Total attendances:							
(Mothers)		••••	3,511	2,831	1,969	401	8,712
(Children)	****	••••	642	589	471	195	1,897
Average attendance	per ses	sion :					
(Mothers)	••••	••••	14	13.5	13	11	13.5
(Children)	••••	••••	2.5	2.7	3	5.2	2.9
Local anaesthetics	••••	••••	100	152	55	5	312
General anaesthetics		••••	1,401	1,358	997	528	4,284
Dentures supplied	••••		855	547	355 (Dent	ures to Carn	egie) 1,757
Free			2	1	2		5
At reduced cost		****	2	1	2		5

Treatment of Ear, Nose and Throat Conditions

Ear, nose and throat consultations have been held at weekly intervals by Mr. Robert Evans at Lancaster Street Welfare Centre.

Number of children called			758
Number of children recommended for operation			 388
Number of children referred back to centre for ol	oservat	ion	 264
Number of children who failed to attend			 106
Number of children recalled with a view to an ea	eration	 305	
Number of children recommended for operation			 213
Number of children not requiring operation			 12
Number of children who failed to attend			 80

By arrangement with the Education Committee, 9 beds per week for tonsillectomy at a cost of £2 10s. 0d. per child were allotted to the Maternity and Child Welfare Department at the Soho Road School Clinic. This scheme could not be put into force until the 5th November, 1947, owing to the increased incidence of infantile paralysis.

Number of children called for operation at Soho Road School clinic	73
Number of children who have had tonsillectomy	55
Number of children who failed to attend for tonsillectomy	18

Cases referred from Maternity and Child Welfare Centres and examined during 1947 at the Children's Hospital for the treatment of the above conditions were:—

Eye, ear and throat cases	 	 221
Tonsils and adenoids (operations performed)	 	 2 3
Tonsils and adenoids (examination only)	 	 108
		352

Parents' Guidance Clinic

Dr. John Hammond, who undertook the work of the Parents' Guidance Clinic in Birmingham in 1935, retired on June 27th, 1947, to the great regret of all. He was succeeded by Dr. A. A. Huse, who took up a temporary appointment on July 1st, 1947.

During the year 1947, 76 sessions were held with a total attendance of 318. From July 25th, 1947, two sessions weekly were held. The extra clinic has been of great benefit to the parents inasmuch as it has enabled early appointments for new cases to be made and more regular attendances of old cases. In the past, new cases failed to attend the clinic because of the long wait for an appointment.

Eighty-four new patients attended and included 45 boys, 29 girls, 9 mothers and 1 father, who were referred for the following reasons:—

CHILDREN

Enuresis combined	with on	e or	more syr	nptoms	of an	emoti	ional					
nature								23				
Fears								9				
Aggressiveness								8				
Temper tantrums								8				
Destructiveness								4				
Mismanagement								4				
Anorexia								3				
Thumb sucking and	pulling	out o	wn hair					2				
Extreme excitability								2				
Backward in speech								2				
Stammering								2				
Retention of faeces								2				
? Mentally retarded								3				
Sleeplessness								ĭ				
ADULTS												
Acute depression								7				
Anxiety state								3				
? Mentally retarded								1				
								84				

One child was found to be mentally defective. Four mothers were referred for electric shock therapy.

The parents continue to express their appreciation of the clinic and welcome the opportunity of discussing child management. The extra visiting sessions since September, 1947, have enabled more individual visits to be paid by the health visitor attached to the clinic, thus maintaining the interest of the parents in the Parents' Guidance Clinic, with a subsequent increase in numbers of attendances. One mother made the five mile journey on foot, with her child, during the 'bus strike to fulfil her appointment.

It is interesting to note the increased confidence of the mother after a few attendances at the clinic at three to four weekly periods.

The small library is still an invaluable help and promotes discussion and interest between fathers and mothers. The fathers continue to show an interest in the work of the clinic, especially during the home visits, as some fathers are still experiencing difficulties in adjustment to home life after the enforced separation of the war years. There is an increasing number of children referred to the clinic whose difficulties are of an emotional nature aggravated by domestic tension due to living with relations.

OTHER ACTIVITIES

Sewing Classes

Sewing classes were held at 26 centres with a total attendance of 9,183, a decrease of 1,987. This is due to the longer breaks at school holiday periods consequent on the new arrangement made in September, 1946, whereby the Evening Institutes are responsible for supplying the teachers for these classes. These breaks are very unpopular with the mothers, and make it more difficult to sustain the interest in these classes.

Health Talks at Centres

During the year demonstrations on the care of milk and milk bottles, fruit bottling and jam making have been held at several centres, and are included in the 85,816 talks given to groups of mothers during the clinic sessions. Miss Pearson has continued her talks to ante-natal mothers at the ante-natal clinics at Dudley Road and Selly Oak hospitals.

Visits

There has again been a great demand for arrangements to be made for routine visits by various groups to see the work of the Maternity and Child Welfare Department. The routine programmes fixed are as follows:—

Sixty student midwives taking Part II Course=5 sessions each at a Centre.

Child Care Reserve students—10 groups of each=1 session each at a Centre.

Fifty-four industrial nurses=2 sessions each at a Centre.

Nursery students—5 groups of 20=1 session each at a Centre.

In addition, several Social Science students from Selly Oak Colleges attended individual centres for practical experience extending over one term. Other sessions at centres have been arranged for individuals and groups of visitors from the Selly Oak Colleges, Anstey Training College and The Physical Training College, Hereford. Arrangements were made for 280 students from the City of Birmingham Teachers' Training College to visit centres, but only 69 responded. Other visitors included doctors (19), D.P.H. students (11), medical students (59), health visitors (2), sister tutor student (1), Queen's nurse (1), teachers (20), student-teachers (4), members of various non-medical professions (14).

Several domestic science teachers accompanied health visitors during a visiting session and many reports have been received stating how valuable this experience has been. A press delegation from Germany interviewed representative mothers at Trinity Road Centre.

Our visitors included representatives from the following countries: Brazil, Denmark, Egypt, Germany, Holland, India, Malta, Norway, Palestine, Poland, Sweden, Canada, Africa, Australia, Czecho-Slovakia, Italy, Malaya and Greece.

Refresher Courses

Twenty-four health visitors attended refresher courses, each of a fortnight's duration, which were held at Southampton, London (3 courses), Cambridge and Durham.

The Royal College of Nursing arranged a residential refresher course in Birmingham in April which was attended by health visitors from various parts of the country.

Groups of health visitors have visited the Accident Hospital (Burns Unit), and the Co-operative Dairy on a number of Saturday mornings during the year.

Home Safety Exhibition

A rota of Health visitors staffed the Maternity and Child Welfare Stall at the Home Safety Exhibition, which was held from September 22nd—27th, 1947.

Nursing Recruitment Campaign

In connection with the Campaign, an exhibition was held in Birmingham Town Hall from April 29th, 1947—May 3rd, 1947. The School Medical Department and the Maternity and Child Welfare Department joined forces in preparing a stall showing, by means of photographs, the various activities of the two departments. Relays of health visitors and school nurses were in attendance to answer any questions or give explanations.

The Preliminary Training Sub-Committee associated with the Recruitment Campaign placed before the Executive Committee a recommendation that in addition to nursery nurse training there should be the following training courses:—

(1) Pre-Nursing Course—(girls 16 years of age and over):

Two-year course for girls who have attained a reasonable educational standard.

4—5 half-days each week—theoretical instruction at Aston Technical College during first year.

2nd year spent at Central Technical College—Practical work in child welfare clinics, school clinics and school medical inspections.

Conditions of service and allowances would be on the same basis as nursery students.

(2) Preliminary Training Course (girls of 15 years and over):

Students would be employed by the Public Health Department and Education Department in nurseries and nursery schools and classes. They would spend one day a week at a continuation school and four and a half days in nurseries, nursery schools and nursery classes.

Conditions of service and allowances would be on the same basis as for girls under 16 years of age employed in nurseries and nursery schools.

As a result of this, a pre-nursing course has been organised by the Education Department. Six candidates were accepted and arrangements made for practical experience in the school clinics and maternity and child welfare clinics and day nurseries.

Dental Survey

At the request of Professor Humphries, facilities have been made available for a dental survey under the ægis of the Medical Research Council. Mr. Leighton began visiting representative toddlers' clinics in November, 1947, for the purpose of examining and reporting upon the dental health of the children and especially in regard to the degree of occlusion of the jaws.

Social Surveys

The Department of Social Medicine at the University has sought the co-operation of this department to enable them to conduct certain enquiries into research problems relating to child health. The following inquiries are included:—

- (1) Investigation into congenital abnormalities of the central nervous system.
- (2) Study of infant weight at birth in relation to certain material factors and social differences.
 - (3) Study of the causes of stillbirth.
- (4) Study of the relation of the method of feeding in the first year to infant death.

School Clinics

At the request of the Education Department, permission was given for the holding of a weekly session of a minor ailment clinic at Kingstanding Centre, which began on Tuesday, July 7th, 1947.

The Domestic Help Service, 1947

Number of domestic helps employed full time				83
Number of domestic helps employed part time		27		
				110
				_
Number of cases attended by Domestic	Hel	ps :		
Confinement cases				1,352
Ante-natal and post-natal cases				93
Housewife ill				102
Housewife was called away from home				1
Elderly people who were infirm, or one of whom	sudder	nly fell	ill	7 0
Several members of one family were ill				1
				1,619

The training of Home Helps continues satisfactorily. Sixty Home Helps have received a course of instruction during the period October, 1944—December, 1947. Ten Home Helps are available to act as Resident Home Helps.

Ca	nwell Hall Babies	s' Hos	pita	1 (60	Cots)				
	Number of Admission			`	•				
	0—1 year	*****							142
	1—5 years								178
	,								
					Total				320
					20002				
	Number of Discharges								317
	(2 against advice			••••			*****		011
	Number of Deaths	,							. 6
	·		••••				C 11		
	The cases dischar	ged ho	ome	were	diagno	osed a	s follo	ws:—	_
	Chest infections (pneu	ımonia,	bron	chitis,	asthma)			69
	Debility and malnutr					,			57
	Ear, nose, throat infec					sillitis.	mastoidi	tis)	37
	Gastro enteritis								20
	Tuberculosis (primar	v com			niliary	1. abo	dominal	2,	
	meninges 1, glan		_						21
	Feeding difficulties								13
	Pyelitis								7
	Anaemia								7
	Pink disease								7
	Rickets			••••	*****				6
	Coeliac							••	2
	Other conditions (incl			olon a	and cone		dicease)		12
	For observation								19
	roi obscivation	••••				•	••••		
									277
									2//
	Incidence of Infectiou	o Diesas							23
									10
	Dysentery Rubella								7
									3
	Diphtheria				*****				2
	Measles							••••	1
D	Mumps							•••••	1
Dea		£ 717							
	Classification of ages	•		,	0 1	0	7	1 6	
	0—2 months		mont	ns		2 mont	ns	1—3	5 years
	2	2			2				
	Causes of death:								1
	Multiple lung abs								1
	Miliary tuberculo								1
	Acute mastoiditi								1
	Gastro-enteritis						••••		· 1
	Pneumonia					••••			1
	Prematurity and	bronch	opnei	ımonia	ı				1
									-

HEALTH EDUCATION

During the past year, to allow for expansion of activities, the staff engaged in health education work has been increased by the appointment of three additional whole time members of staff, i.e., two male lecturers and one female lecturer. In addition, Dr. Warwick has been made responsible for developing and co-ordinating the work. In spite of the continual pressure of work in district visiting and attendance at child welfare centres, 41 health visitors during the year undertook outside lectures both in and out of duty hours.

As the whole-time staff now consist of three male lecturers, one female lecturer and a shorthand-typist, it was necessary to provide more office room for this work and temporary accommodation was obtained in Room 5 of the basement of the Public Health Department of the Council House. By the end of the year it was becoming apparent that this accommodation was inadequate.

Considerable expansion has taken place during the past year, the range of subject matter has been materially extended and a wider field of population has been reached.

Lectures given:			1946	1947
Lectures at schools		 	407	745
Lectures to youth organisations	3	 	46	135
Lectures to adult groups		 	124	173
			577	1,053
			-	

Teaching in Schools

The raising of the school leaving age provided the opportunity to introduce a syllabus of school lectures covering a much wider field of health education.

A course on mothercraft extending over one year, including visits to maternity and child welfare centres and dairies and the showing of suitable films has commenced in a number of girls' schools. For other schools a comprehensive hygiene course has been introduced. Arising from the contacts in the schools a request was made by the Education Department for a special three-day course on child care for members of their staff. This was arranged and attended by head mistresses and domestic science teachers. As the result of this course, some head mistresses have asked for advice and help in arranging new schemes of health teaching in their schools.

In boys' schools, expansion has taken place on the following lines; two distinct courses have been offered.

(1) "Living and Learning."

This course is given to first, second, third and fourth year boys.

(2) "Physiology and its application to all aspects of Health."

This is a more advanced course designed to meet the needs of the older boy.

The time allotted to each course is one period a week extending over 40 weeks.

Out of School Activities

Children's Cinema Clubs. A certain number of health films with talks have been shown on Saturday mornings at the following cinemas:

The Odeon, Warley.

The Odeon, Kingstanding.

The Odeon, Perry Barr.

Difficulty is experienced in finding films suitable for showing to such a wide age range as is found in children's audiences. If more films were available, this work could be expanded. This type of teaching is particularly valuable as it is possible to deal with large numbers in a short time.

Youth and Adult Organisations. Demands from these organisations show a marked increase; these groups in particular have shown expansion:—

- (1) Co-operative guilds.
- (2) Probation homes.
- (3) His Majesty's Prison, Winson Green.

An experimental course of mothercraft was introduced to selected women prisoners and has been most successful.

Parent Teacher Associations

Requests for advice and help regarding the preparation of syllabuses and suggestions for lectures are increasing. More of these groups are being formed and it seems likely that this branch of the work will continue to grow.

Birmingham Accident Prevention Council

An exhibition demonstrating "Safety First" was held in the basement of the Town Hall. A section dealing with "Safety in the Home" was prepared by the Department.

Assistance has been given in arranging various exhibitions held during the year in connection with the Girls' Training Corps and the Maternity and Child Welfare Centres.

Library Books

During 1947 increased demands have been made by lecturers for the use of library books and visual aids. The scope of the work is extending and a wider range of literature is needed. Health education lecturers greatly appreciate the opportunity of borrowing up-to-date books which assist in the preparation of lecture material.

Posters

Posters are either purchased or prepared in the department.

Film Strips

A film strip apparatus has been purchased and is in great demand.

NURSERIES

Following the recommendations made in 1946 by the Education Committee and the Health Committee to the City Council, the last of the fifteen maycrete hutted nurseries have been taken over this year by the Education Committee and converted into nursery schools, as follows:—

Marsh Hill Nursery	 	 	 3.2.47
Beeches Road Nursery	 	 	 3.2.47
Goodway Road Nursery	 	 	 3.3.47
Ward End Park Nursery	 	 	 28.4.47
West Heath Nursery	 	 	 5.5.47
Pershore Road South Nursery	 	 	 16.6.47
Allenscroft Road Nursery	 	 	 13.10.47

The number of day nurseries now under the control of the Health Committee has been reduced to 45, being approximately two-thirds of the number open during the war years. This number now allows for 2,293 nursery places as compared with 2,584 places in January, 1947. In December, 1947, there were 2,341 children on the nursery registers as compared with 2,403 in January, 1947; the average attendance was 1,614 compared with 1,730 at the beginning of the year. On the other hand, 2,885 were on the waiting list as compared with 1,301 in January, 1947.

Owing to the increasing size of the waiting list, it was decided from July, 1947, to reserve places in the nurseries for children whose mothers were doing essential work, particularly in connection with the export drive.

Because of the demand for load shedding made by the Ministry of Fuel and Power, the factories altered their working hours, deciding to work 12 hours daily 4 days per week, allowing one free working day and a free Saturday.

This accounts in part for varying attendances in the nurseries and for lower averages and small attendances on Saturdays.

Owing to the pressure of the demand for day nursery provision in the Bloomsbury Street area, it was decided to re-open 77, Great Brook Street on the 18th August, after certain adaptations were completed.

- 92-4, Pershore Road. Number 94, Pershore Road was released for private occupancy and 92, Pershore Road was re-adapted for a small unit of 13 babies and tweenies and a reception room for 20 toddlers who were conveyed by an ambulance daily to and from Allenscroft Road nursery, until that nursery closed on the 13th October, 1947.
- 30a, Allenscroft Road. Owing to heavy demand for nursery places in Balsall Heath area and the closure of the toddler unit at 92-4,

Pershore Road, it was decided to transport 40 children to Allenscroft Road Nursery, which had little local demand—20 children being collected from Hope Street Welfare Centre, and 20 from 92, Pershore Road each morning and transferred to Allenscroft Road Nursery by ambulance and returned to the collecting stations at night. When this nursery closed on the 13th October, 1947, arrangements were made to convey the children to and from their reception centres—10 to Springfield Road, 15 to 671. Yardley Wood Road, and 15 to Highfield Road, Yardley Wood.

Huts attached to Infant Welfare Centres. These huts have been purchased by the Corporation from the Ministry of Health as follows:-

189, Shirley Road £500 298, Warren Farm Road £425 £425 395, Monument Road £275 79. Marsh Lane Highfield Road, Yardley Wood £450

The hut built as a toddler annexe in the garden of 298, Birchfield Road, was purchased for £250.

Kitchens

At the beginning of the year three central kitchens were responsible for the cooking of the mid-day dinners for all the day nurseries except one, and the provision of rationed and other goods to these nurseries for other meals.

Owing to the reduction in the number of day nurseries, it was decided to close the Yardley Green Road kitchen on the 26th April, 1947. The building and general items of equipment were transferred to Yardley Green Road Sanatorium.

Average number of Meals served Weekly

Bacchus Road Kitch	hen:				
Main meals		 	 	 	5,907
Breakfasts		 	 	 	3,076
Teas		 	 	 	4,742
Milk drinks		 	 	 	8,760
Staff hot bever	ages	 	 	 	5,310
Selly Oak Kitchen:					
Main meals		 	 	 	6,398
Breakfasts		 	 	 	3,049
Teas		 	 	 	5,256
Milk drinks		 	 	 	10,294
Staff hot bevera	ages	 	 	 ••••	6,217
Total meals served a	weekly:				
Main meals		 	 	 	12,305
Breakfasts		 	 	 	6,125
Teas		 	 	 	9,998
					28,428

Islington Row. The only day nursery cooking for itself served on the average weekly:—

Main meals	 		 	••••	191
Breakfasts	 	 	 		123
Teas	 	 	 		150
Hot beverages	 	 	 		264

Training of Nursery Students

A new National Nursery Examination Board has been formed and regulations for admission to the examination for the National Nursery Certificate have now been formulated. Of the 65 students who commenced the first course on the 3rd February, 1947, 25 withdrew or were found unsuitable for training as the term continued. Thirty students commenced the second term in August, but 10 withdrew or were found unsuitable for training.

Examination—April, 1947	 21 entered	19 passed
		2 failed
Examination—July, 1947—London	 5 entered+	5 passed
	1 re-entry	1 failed
November, 1947	 No entries	

Child Care Reserve Courses

The following Child Care Reserve Courses were held at Garrison Lane Nursery School giving 4 weeks' training to nursery assistants, 18 years and over.

April 14th—May 10th	15 entries	13 passed
		2 failed
June 23rd—July 18th	15 entries	13 passed
		2 withdrew
September 9th—October 3rd	15 entries	10 passed
		5 failed
November 17th—December 12th	4 entries	3 passed
		1 failed

Wardens' Course

A Wardens' course was held at Garrison Lane Nursery School from 13th October to 30th October, 1947.

15 entries. 14 passed. 1 failed.

Matrons' Refresher Course

A Matrons' Refresher Course was arranged and commenced in Birmingham on the 9th October, 1947. Owing to the difficulty of releasing Matrons from their Nurseries, it was decided to hold the lectures one afternoon per week, two lectures being given each afternoon. Visits to day nurseries and welfare centres were also arranged and appropriate films were shown. The last lecture of the course was given on the 4th February, 1948.

Nursery Supervisors

One health visitor acts as Senior Supervisor of Nurseries, and four State registered nurses with nursery experience have been appointed Nursery Supervisors. All assist with the students' lectures and demonstrations. Two trained nursery school teachers act as Superintendents, and are responsible for the supervision of wardens and educational training in nurseries.

Residential Day Nurseries

One 24-hour nursery still functions at 40, Somerset Road, for children of transport workers and they are resident there from Mondays to Saturdays each week, going home for week-ends.

Residential nurseries as a whole find great difficulty in acquiring senior staff. One reason is that the remuneration is not any more attractive than in day nurseries in spite of the fact that there is much more responsibility with week-end duty and no Bank holidays.

Another great difficulty in the residential nurseries is that many students have to be billetted out, as there is not enough residential accommodation in the nurseries, with the consequent inconvenience when the nurses are ill. On their off-duty days they have to get up at the same time and go to their parent nursery for meals. The bedroom only is provided with furniture, which is often sparse, and the nurses are not able to return to their billets till about 10 p.m.

At Droitwich, during September, "Briarlea," a substantially built brick residence near the nursery, was purchased by the Committee as a nurses' home for the Oaklands nursery. It has accommodation for 12 nurses and 1 warden-housekeeper.

Number of nurses in billets at end of 1947:—

Oaklands	 ••••	12	Pype Hayes		_
Overbury	 	5	Flint Green		4
Perry Villa	 	14	Meadway		12
Wassell Grove	 	2	Coleshill Road. All	nurses	non-

resident

Nurses' Hostel

As four of these nurseries cater only for children 0—2 years, and one nursery for children 2—5 years, difficulty has been experienced in providing adequate toddler experience for the nurses to satisfy the conditions of the National Nurses' Examination Board examination. An offer of hostel accommodation at the District Nurses' Home, 948, Warwick Road, was gladly accepted. Five nurses were admitted on the 24th November, 1947.

Since September, 1947, it has been increasingly difficult to cope with the demand for admission of the 0—2 year olds to the residential

nurseries as the Education Department have been unable to arrange for the transfer of children reaching the age of two in our nurseries to Erdington Cottage Homes, owing to overcrowding there.

At the end of the year there were 32 children over 2 years of age still in the nurseries admitted through the Public Assistance Department.

Wassell Grove Nursery. Number of beds, 58. Children 0-5 years.

This residential nursery was completely isolated from all road communication as a result of heavy snowdrifts during February. Fresh milk supplies were unobtainable for 48 hours, but through the kind co-operation of the Worcestershire County Council Highways Department, and a neighbouring farmer, access was gained to the nursery and milk supplies were delivered.

A new pump house has been constructed and a new sewage scheme has been completed. It has also been decided to instal electric light to replace the gas lighting. Some extension to the central heating system was made because of inadequate heating in two Baby rooms.

Ninety children were admitted to the nursery and eighty-six were discharged during the year.

Thirty children were transferred to Little Bromwich Hospital with measles and three with chickenpox and measles. Since the 29th October, 1947, there were 9 cases of infective hepatitis affecting 8 nurses and 1 maid.

Five nurses sat for the nursery examination and 4 passed.

Oaklands, Droitwich. Number of beds, 50. 0—5 years.

There have been 69 admissions during the year and 71 discharges. There were 26 cases of rubella during March and April, 7 cases of Sonne dysentery in July and 18 cases of chickenpox in December, all of which were nursed in the nursery owing to the shortage of beds in Little Bromwich Hospital. Six cases of measles were transferred to Little Bromwich Hospital in August.

One nurse passed the nursery examination in November.

Red House, Overbury. Number of beds, 30. 0-2 years.

Thirty-two children have been admitted during 1947 and there have been 35 discharges. There were six cases of enteritis and five cases of whooping cough. The health of the staff has been exceptionally good this year; there was one case of rubella.

Two nurses sat for the nursery examination and one passed; the other failed but passed the examination at a later date.

Carnegie Institute. Number of beds, 10.

Owing to the unprecedented demand for admission of children 0—2 years to the residential nurseries through the Public Assistance Department, this nursery was opened from the 8th March, 1947, to the 14th June,

1947, providing 10 cots. The nursery had then to be closed to make way for the opening of the premature baby ward.

146, Coleshill Road. Number of beds, 22. 0—3 years.

There have been 76 admissions and 76 discharges during the year.

Thirty children have been transferred to hospitals for various reasons— 18 of these being measles and three cases of rubella. One child, admitted to the Accident Hospital following scalds, died of pneumonia.

Flint Green House. Number of beds, 25. 0—2 years.

There were 87 admissions and 102 discharges.

Twenty-six children have been transferred to hospitals for various reasons, 9 cases of whooping cough and 3 cases of measles to Little Bromwich Hospital. Ten children were transferred to Canwell Hospital for observation.

74-80, The Meadway. Number of beds, 30. 2-5 years.

This nursery provides accommodation for 30 toddlers, admitted in the first place for short periods only. There were 164 admissions and 160 discharges during the year—128 of these being admitted straight from home and 120 discharged home. Twenty-five children were transferred to Little Bromwich Hospital with measles.

Perry Villa. Number of beds, 35. 0—2 years.

There were 179 admissions and 165 discharges during the year.

Fifteen cases of whooping cough occurred in January, thirteen of these being transferred to Little Bromwich Hospital, where one died. In August and October, one case of whooping cough occurred and all contacts in both cases were immunised. No further cases developed. Thirty-seven cases of measles were transferred to Little Bromwich Hospital during February and March—one of whom died.

Many children over 2 years have had to remain in the nursery, as transfer to Erdington Cottage Homes has been impossible.

Pype Hayes Hall. Number of beds, 42. 0—2 years.

There were 172 admissions and 164 discharges during the year.

Fourteen cases of Sonne dysentery were admitted to Little Bromwich Hospital from the 21st January, 1947 to 21st July, 1947, and seven cases of enteritis (two of whom died) were admitted to Little Bromwich Hospital. There were five cases of diphtheria among the children, four of whom were transferred to Little Bromwich Hospital and two nurses who developed it were also transferred to Little Bromwich Hospital.

A month old baby admitted to Dudley Road Hospital with bronchitis died three weeks later in Little Bromwich Hospital with nasal diphtheria.

Some children have had to remain in the nursery after reaching the age of two years, as transfer to Erdington Cottage Homes has been impossible.

Hawthorne House

This property was bought by the Corporation for use as a residential nursery to accommodate 45 children from 0—2 years, but owing to difficulties met with during adaptations, its opening had to be postponed until 1948.

2, Hawthorne Park

This house, adjoining Hawthorne House, was also bought by the Corporation for a nurses' home for the staff of Hawthorne House nursery, to accommodate 23 staff. This also will not be ready for opening until 1948.

RESIDENTIAL SCHOOLS

There were three residential schools on the register at the beginning of the year. One of these—the Remedial Speech Residential School—ceased to admit resident children after the summer term owing to staff difficulties. Of the two remaining schools, one had only 5 boarders with 1 child under 9 years, and the other 43 boarders with 8 under 9 years.

VOLUNTARY HOMES

These homes take children for maintenance and care apart from their parents.

St. Philip's Catholic Home. Three new children under 9 years were admitted during 1947, 22 children under 9 years being resident at the end of the year.

Nazareth House, Rednal. Twenty-eight new children under 9 years were admitted during 1947, 64 children under 9 years being resident at the end of the year.

Church of England Children's Society. 2 Homes.

- (1) **Toddler Home**—for children 2—5 years. 14 children admitted during the year, and 20 children in residence at the end of the year.
- (2) **Boys' Home**. Only one boy under 9 years was resident for part of the year, being later discharged to foster parents.

Middlemore Emigration Homes. Eleven new children under 9 years were admitted to the home during 1947, 33 children under 9 years being resident at the end of the year. Sixteen children emigrated during the year.

Maryvale Nursery—for children 1—5 years. Thirty-nine new children were admitted during 1947, 68 being in residence at the end of the year.

Sir Josiah Mason's Orphanage. Twenty-one new children under 9 years were admitted during 1947, 42 children under 9 years being in residence at the end of the year.

"Private Children's Hotel." A "children's hotel" was opened on the 14th May, 1947, and registered to take 4 children over and above the proprietor's own 2 children. Later the proprietor decided to remove to a much bigger house. This was occupied on the 10th September, 1947, where registration was given to take 8 children, including the proprietor's own 2 children. The premises are under regular inspection.

CARE OF THE UNMARRIED MOTHER

During the year there was a decrease in the number of cases dealt with by this Department from 1,324 in 1946 to 1,110 in 1947. Of these cases, 792 were unmarried mothers and 318 married women. Amongst the 792 cases, 624 were first pregnancies and 168 were multiple cases. The number of illegitimate children born to unmarried women were somewhat fewer than in the previous year.

					First		Multipl	e	Married
Dealt with at	:				cases		cases		women
Hope Lodge					41		_		
Hostel					25		7		
Lyncroft House					9		4		1
Woodville					20				
Francis Way					20		_		_
Park Hill					6				
Beechcroft					2		3		1
Birmingham Infi	rmary				17		20		15
Homes out of Cit	у				34		15		
Own home excep	t for co	onfinen	nent		311		76		204
Own home entire	ly				81		22		89
Returned to own	count	ry			15		3		1
Left City before	confine	ment			20		7		1
Born out of City					23		11		6
Grand	l Total				624		168		318
35 cases — Moth	ers and	l babie	s still	in the	Homes				3.15%
45 cases — Babie	s have	died a	nd sti	llbirths	3				4.05%
131 cases — Babie	s have	been a	adopte	d					11.81%
10 cases — Babie	s are v	vith for	ster m	others					0.90%
33 cases — Mothe	ers hav	e mari	ried ba	bies' fa	athers				2.97%
60 cases — Mothe	ers and	babie	s have	left th	ne City				5.41%
19 cases — Babie	s are in	n Hom	es wit	hout th	ne moth	er			1.71%
777 cases — Mothe	ers at l	nome w	vith th	eir bal	oies				70.00%

^{1,110}

Home visits paid	re un	ımarri	ed moth	ners		 	969
Special visits paid	d re u	nmarı	ried mot	thers		 	185
Cases visited in h	ospit	als				 	522
Homes inspected	re su	itable	lodging	s with	babies	 	22
Special visits paid	d re	V.D. c	ases, etc	c.		 	26
Office interviews,	appl	ication	ns	••••		 	946
Office interviews,	othe	r than	applica	tions		 	3,433
V D. Office interv	views					 · 	60
Girls under age o	f cons	ent:					
14 years old						 	2
15 years old						 	1
16 years old			••••	••••		 	13
							16

Summary of the 168 multiple cases dealt with in 1947 (excluding married women)—

123 have other children in their care (36 of these have more than one child).

15 first child dead.

13 first child in home (resident nursery).

15 first child adopted.

2 first child adopted by grandparents.

Fifty-two of these cases were living with the putative father and 135 had been dealt with previously by the Department.

	Total	Cases								
	Illegit.	dealt								
	imate	with by								
Year	Births	Dept.	2nd	3rd	4th	5th	6th	7th	8th	9 <i>th</i>
1947	1,310	1,110	123	28	7	3	3	2	2	
1946	1,551	1,324	101	25	6	2	2	2		1
1945	1,841	1,543	95	28	2	3	1	2	2	_
1944	1,445	1,418	7 9	20	9	5	_	1	1	
1943	1,163	1,078	54	15	8	2	1			

The following table gives details of the cases among married women :-

Adopted		 	 	 	47
Living with putative f	ather	 	 	 	85
Divorced		 	 	 	20
Husbands in Forces	0110	 	 	 	17
Apart from husband		 	 	 	135
Widows	••••	 	 	 	14
					010

318

There were 35 cases of venereal disease and they were dealt with at the appropriate clinics. \cdot

Lodging Money Grant

The cases helped were either not eligible for the Homes or were unsuitable.

The amount spent was The amount refunded	£31 —	0 6
Net cost	£31	0 6
The number of girls helped		14
Average cost per case	£2	4 4
ADOPTIONS		
First enquiries re adoption		480
Applications accepted by Public Health Dept.		317
Applications to Adoption Societies		56
Applications in respect of private arrangements:		
Direct placing		78
Third party		7
Foster children adopted by foster parents		21
Applications refused, referred elsewhere, or cancelled		163
First babies under six months Illegitimate babies of married women Children of a second or subsequent pregnancy Older children	 	114 66 28 30 21
Private Arrangements:		
First babies of unmarried mothers under 6 months		46
Other children placed		39
Total Adoption Orders granted in the City		484
Number known to Public Health Department		392
(Approximately 81%).		
Orders granted by Courts outside City of Birmingham		28
Total Office Interviews		3,430
Total Visits		1,298
Attendances at Children's Court		86

Deaths: 1

Coroner's inquest. Verdict—inhalation asphyxia.

This child was a private placing.

All children received a thorough medical examination before placement for adoption.

Total number examined			 	 	357
Unfit for adoption			 	 5	
Healthy			 	 242 >	357
Minor defects			 ·	 110 j	
Children reviewed from 1945	and	1946	 	 	67
Foster children examined			 	 	2

- (1) Considered unfit for adoption:
 - (1) Extensive atelectasis one lung (11/12). 5 cases, nevertheless adopted. Attends Birmingham Children's Hospital.
 - (2) Coeliac disease. Nevertheless adopted. Relatives' child.
 - (3) Sub-normal mentality. Remaining with foster mother.
 - (4) Lesion of skin.
 - (5) Very premature baby. Mother only 15, and poor family history.
- (2) Foster children examined: 2 cases.
 - 1) +ve Mantoux. Admitted to institution (Outside City case).
 - (2) Sub-normal mentality.

(a) Respiratory: Bronchitis

(3) Defects in children adopted:

(a)	Respiratory:	Bronchiti	.s					2
		Bronchiti	is with ge	neral deb	oility			1
		Otitis me	dia					3
		Enlarged	tonsils ar	nd adeno	ids			6
		Post pner	umonia (2	K-ray)				14
		Post mea	sles debili	ity				1
		T.B. conf	acts					2
(b)	Blood and cire	culation:	Anaemia					7
(-)			Mild cong	enital he	eart			2
			? Vena az					1
(-)	D-6-:	M:14 -:-14-		76				
(c)	Deficiency:	Mild rickets			••••		•	4
(<i>d</i>)	Genito-urinar	, ,,						2
		One un	desc. test	icle				1
		Pyuria						2
(e)	Congenital:	Bilateral br	anchial cl	eft				1
,	Ŭ	Bilateral ce	rvical rib					1
		Mild laryng	eal strido	r				2
		NT .						1
		Syndactylis	m					2
		Slight talip		ot				1
(<i>f</i>)	Miscellaneous							1
())	Miscellaneous	Impeti						1
		Urticar	_		••••	••••	••••	1
			l debility				••••	7
		Strabis			••••	••••		2
			sis 5th an			••••	·····	1
			ed thymu					40
		_	tinal glan					1
		Medias	ciliai giali	us	••••	*****		
			To	tal defec	ts			110
			10	tar derec				***

(4) Reviews from 1945 and 1946:

					appreciable isease	Condition unchanged	Improved
47 E	Enlarged thymus				33	4	10
6 F	Post pneumonia				2	4	_
3 7	Γ.B. contacts				1		
1 I	Lung fibrosis (unfit f	or adop	otion)			1	
1 0	Genu valgum (attend	ling Bi	rming	ham			
	Children's Hos	pital)				1	_
10	General debility				1		_
1 L	Large abdomen				1	_	
1 L	Large heart shadow				1	_	
1 ?	Juxta epiph. strain	of shou	lder jo	ints	1	·—	
1 I:	rreg.: ossification fe	m. epip	oh. ? b	irth			
	trauma				1		
1 ?	Coeliac disease				1	_	
1 L	arge head				1	_	
2 ?	Sub-normal mentals	ity			2	_	

In addition a detailed medical certificate is required from all prospective adopting parents.

CHILD LIFE PROTECTION

149

	Applications fo	or foster mo	thers				36
	Applications fo	or foster chi	ldren				452
	Office interview	vs					2,429
	Homes inspect	ed and rejec	cted				12
	Homes register	ed					74
	Foster children	registered					107
	Unnotified fost	-					24
	Routine visits	••••	••••				165
	Special visits r	e foster chil	dren			••••	518
	•						
1 4	the and of 1047	the figures a		fallogg			
Al	the end of 1947,	ine jigures v	vere as	jouows	,		
	Foster mothers	on scheme				36	147
	Foster mothers	s " non-sche	me ''			111	· · · ·
	Foster children	on scheme				38٦	150
	Foster children	" non-sche	me ''			135	173
T.	(-1 f. (7 1, 1,7	7	- 1045	7 -		
1 0	tal foster children	n aeatt with	i aurin	g 1947	' :		
	Scheme					60 J	208
	"Non-scheme			••••		60 J	200
	Illegitimate	Scheme				52)	
	211081111111111111111111111111111111111	" Non-sche	-me ''	••••		82	134
	T			••••			
	Legitimate	Scheme		••••	••••	8 J 66 J	> 74
		" Non-sche	eme "			66 J	

Foster mothers interviewed.....

5

Foster children on Scheme who attained the age of 5 years

Foster children on Scheme who removed:					
Returned to parent	 		11		
Adopted	 *****		14		
Became non-scheme foster children	 		5		
Removed to institutions	 		3	1 Sanatori	a.
				1 Erdingto	on
				(mental	defect)
				1 Middlen	ore
					Homes
Died	 		_		
Foster children attaining the age of 9 years	 	••••			4
Total payments to foster mothers	 £1,552	11	0		
Total payments by parents	 £872	12	7		
Cost to Public Health Department	 £679	18	5		
Average cost per child, per week	 ••••	6	7		

CHILD HEALTH INSTITUTE

The following extract from the Annual Report of the Child Health Institute is of interest:—

The year under review has witnessed a consolidation and extension of the activities of the Institute.

A. Undergraduate Teaching

The reason leading to the formation of the Birmingham Institute of Child Health was a desire to improve general medical standards in relation to the care of the child in health and in disease. It has been estimated that up to 50% of the practice of the average family doctor is concerned with children and therefore the necessity for General Practitioners to be well versed in the care of children, both in sickness and in health is very important. The future of the nation depends on raising the standards of health of the child and this can be best achieved by increasing undergraduate instruction. Medical students must receive a full and balanced training in order that their knowledge with regard to the nutrition and development of normal healthy children is on as high a level as their care and management of sick children.

The arrangements for such training in Birmingham University have been planned to make it as comprehensive as possible. During their three months' attendance at the Children's Hospital, students spend over a quarter of their time in the study of the healthy child, including instruction in methods of preventive medicine as applied to child health in the routine work of the Local Authority. They are given an opportunity to see for themselves from an administrative as well as a clinical angle how a modern Health Department discharges its duties and responsibilities as they relate to Child Welfare.

Visits are paid to ante-natal and child welfare clinics, to the Premature Baby Unit at Sorrento, to Day and Residential Nurseries, to the various activities of the School Medical Service, and to the Tuberculosis Department. Health Education and the scope and character of Health Visiting, together with the importance of a study of the home environment and economic standards, also receive emphasis. They obtain an insight into the work of the domiciliary midwifery service together with the arrangements for the care of the unmarried mother and the deprived child. It is considered that training on these lines will enable the general practitioner of the future to accept full responsibility for both the maintenance of health as well as the prevention and treatment of disease. By these means there will be attained a fusion of two health services which in the past have been separated and unco-ordinated.

B. Co-operation between Personnel of Local Authority and Children's Hospital

This association between the child when well and the child when ill has been further strengthened by arrangements whereby the Children's Hospital Registrars have included in their duties, responsibilities for two sessions a week at the Local Authority Clinics and six Medical Officers from the Birmingham Local Authority attend the practice of the Hospital as Clinical Assistants on two half-days a week.

These arrangements have enabled the Hospital Medical Officers to have a first-hand practical knowledge and experience of the work of the Child Welfare Services and to emphasise its place, character and importance in the tutorial instruction given to medical students. Furthermore, this liaison with the Local Authority and Hospital Medical Officers has been mutually advantageous and in practice has worked smoothly and efficiently.

C. Postgraduate Training

The importance of providing facilities for postgraduate training has been appreciated by the Institute since its formation. Broadly speaking, there are three types of postgraduate training: (1) for those doctors who intend to specialise in pædiatrics, (2) for general practitioners wishing to have their knowledge refreshed and brought up to date, and (3) for medical officers who wish to specialise in administration with special relation to child health and who, at the same time, desire to extend their clinical knowledge. It is necessary to provide different arrangements for these three groups. In general it has been realised that the opportunities and facilities for such postgraduate training in this country are still very limited in both scope and

character and the experience of the last twelve months has demonstrated the necessity for its extension. All the world over the importance of child health and welfare is being increasingly appreciated, and Institutes of Child Health must provide as complete and comprehensive a training as possible. This has been brought to notice by the number of applications received from postgraduate students, not only in this country, but also in the British Empire and many foreign countries in Europe and elsewhere. Many of these students are not only desirous of obtaining clinical instruction but also of receiving training in administration to enable them to organise Child Welfare departments in their own countries. During 1947 the Institute has been able to accommodate postgraduate students from: India, Palestine, Italy, Poland, Malta and South Africa. In addition foreign visitors who wished to be conversant with the functions, activities and administrative arrangements of the Birmingham Institute of Child Health, have included representatives from Egypt, Italy, Spain, Hungary, Czecho-Slovakia, Sweden, West Africa, Australia, Denmark, Malay States, Holland and Germany.

BIRTH CONTROL CLINICS

			Dudley Road Hospital	Selly Oak Hospital
(1)	Nu	mber of women seeking advice:		
	(a)	Married women suffering from gynaecological conditions, making pregnancy detrimental to health	28	41
	(b)	Married women suffering from other forms of sickness detrimental to them as mothers in that child-bearing is likely seriously to endanger life	19	63
	(c)	Other cases not coming within the categories authorised by the Ministry of Health	1	2
(2)		mber of women advised in birth control thods	47	104
3)		mber in which birth control advice was given pregnancy resulted	7	5

Notes on Birth Control Clinic at Dudley Road Hospital

The total number of attendances at the Birth Control Clinic was 393, of which 47 were new cases accepted for advice.

Nine patients were advised on account of recent severe toxæmia or persistent hypertension; six following complicated and operative confinements. Medical indications included five cases of pulmonary tuberculosis and eleven of rheumatic carditis. Seven patients became pregnant during the year. Two had not attended for two years and had not been taking precautions. Four other patients had failed to follow advice. The three remaining cases appeared to be due to failure of the method, or of the patients' ability to carry it out.

In no case was termination of pregnancy advised.

Notes on Birth Control Clinic at Selly Oak Hospital

During the year 1947, there were 452 attendances at the Birth Control Clinic. Of these 343 were old patients attending for second or further visits. 109 women attended for the first time, and of these five were refused advice as they were not suffering from medical or other forms of sickness making pregnancy detrimental to their health.

Of the 104 new cases, 63 were suffering from medical sickness, and 31 from gynæcological or obstetrical conditions. Fifteen of these had toxæmia of pregnancy or eclampsia. In two cases, advice was given to mothers who had had infants dying of icterus gravis.

Pregnancy was known to have occurred in five women attending the Clinic. Two women had not been for over twelve months, one was very irregular in the follow-up attendances and did not follow instruction.

In two cases the women attended regularly and had apparently carried out the instructions given.

SECTION C

SANITARY CIRCUMSTANCES

Water Supply

No changes have occurred in the general water supply of the City, which has continued to be satisfactory, both from the point of quality and quantity. A constant supply of pure water is available from a network of distribution mains, and of the 288,847 dwelling houses in the City, 282,633 have an internal water supply.

The closest co-operation has been maintained with the Water Department in all aspects of the work undertaken by this Department throughout the year.

Routine Sampling of Corporation Water

Routine samples have continued to be taken from the Frankley and Whitacre undertakings and from the deep wells at Shortheath and Longbridge, the samples being submitted to bacteriological investigation and chemical analysis. At each weekly visit to Frankley and Whitacre, samples are taken from the raw water both before and after storage, and from the treated water after filtration and chlorination, special samples being also taken from the filter outlets, the storage reservoirs and the City levels. In this way the quality of the water supply is safeguarded at each stage of the purification process from the source of supply to the consumer.

The routine examination of samples taken from the water-works in the Elan Valley and from the aqueduct at Ludlow has continued and the total numbers of samples of Corporation water examined during 1947 were:—

Chemical	••••	 ••••	 	 	 328
Bacteriological		 	 	 	 602

Throughout the year, all samples of treated water leaving Frankley and Whitacre have, with one exception, been entirely satisfactory. The single exception occurred in July when a small number of B.coli (intermediate types) were found in the filtered water at Whitacre. Subsequent samples were completely normal, and there was no apparent cause for this slight degree of contamination.

The results of chemical analysis have been equally satisfactory, the average composition of the filtered water leaving Frankley and Whitacre being:—

Parts per				
100,000			Frankley	Whitacre
Total solid matter			4.6	43
Free and saline ammonia	ı		0.000	0.000
Albuminoid ammonia			0.002	0.002
Nitrogen as nitrates			 0	0.20
Oxygen consumed in 3 h	rs. a	t 27°C.	0.12	0.03
Chlorine in chlorides			0.9	3.5
Alkalinity as CaC03			0.9	
Hardness as CaCO ₃			$2\cdot 2$	21.0
pH			$7 \cdot 2$	7.9
Erosion			11	
Plumbo-solvency			0.12	_

The soft water obtained from the Elan Valley is liable to have a plumbo-solvent action and hydrated lime is added to the water at the Elan Valley Waterworks to the extent of 0.6 parts per 100,000.

Pollution of Bartley Reservoir by Seagulls.

During February, the severe weather was responsible for driving seagulls inland, and the water in Bartley Reservoir showed definite evidence of pollution. Explosives were used to disperse them as in previous years, and the increase in chlorine to 0.5 p.p.m. was sufficient to maintain the quality of the filtered water. Seagulls returned to the reservoir for a short period in December.

Sampling of Well Water

During the year 37 private wells were inspected, and 20 samples were submitted to bacteriological and 19 to chemical investigation. The well water was also sampled from three institutions under the control of the Health Committee, two of which lie outside the city boundary, 45 bacteriological and 21 chemical samples being submitted for examination. Owing to a deterioration in the quality of the water, the well at Rubery Mental Hospital ceased to be used for drinking purposes during the year.

Sanitary Inspection

There were 129,113 visits made during the year by the staff of sanitary inspectors. Of this total 86,476 house inspections were made for various reasons, and investigations of infectious diseases and miscellaneous complaints caused 9,771 visits.

The summonses taken out during the year were as follows:

	General nuisances						653
							6
	Dogs fouling footway						 0
	Disobeying Magistrates'	Order					 1
٠	Contravention of houses	let in	lodgings	bye	-laws		 1
					TOTAL		 661
	Magistrates' order w	as obt	ained in	207	instance	3.	

Squatters' Camps

There are 13 military camps in the City now occupied by squatters. The number of families residing therein varies from time to time, but is approximately 300. These huts are kept wind and weatherproof in accordance with instructions issued by the Ministry of Health. Water supplies have been maintained and sanitary conveniences kept in good repair.

When these huts were taken over by the department the risk of fire was very great, and fire precaution work has been carried out to lessen the risk as far as possible.

Periodical visits are made by the sanitary inspectors who advise the occupants on general camp hygiene and orders for any maintenance work necessary are sent to builders by the department.

Section 59, Birmingham Corporation Act, 1946

Notices are served under this section on the persons responsible for the opening and cleansing of obstructed drains, calling upon them to remove any obstruction within 24 hours. If the Notice is not complied with within the time specified, the Corporation may carry out the work necessary to abate the nuisance and any expenses so incurred may be recovered from the person on whom the Notice was served.

Total number of Notices served during 1947			2,817
Work carried out by owner in the time specified			1,494
Orders given by Corporation to builders to carry	out neces	sary	
work		••••	1,323

Licences and Priority Certificates

All Statutory Notices require a licence where the cost of the work entailed is in excess of £10*. Works are accordingly priced by the department and a licence issued for the necessary amount. Priority Certificates are issued in respect of controlled materials necessary to comply with Statutory Notices. Many applications have also been received from owners and builders in respect of repairs to property in the city which have not been the subject of a Statutory Notice, and where the cost of the work is less than £10*. These have been checked by the sanitary inspectors and Certificates issued in appropriate cases.

Number of licences issued during 1947	 	 10,43	35
Total sums involved in licences issued	 	 £245,55	55
Number of Priority Certificates issued	 	 2,06	39

Since the 14th September, 1947, 465 permits to purchase timber have been approved and forwarded to the Timber Control for issue.

^{*}The limit of £10 was increased to £100 as from July 1st, 1948.

Enforcement Section

In March, 1947, a special Enforcement Section was set up in the department to deal with summonses necessary as a result of non-compliance with Statutory Notices, and two sanitary inspectors are engaged full time in this work.

		Summonses issued during 1947	Magistrates' Orders made during 1947
1st July to 30th September		130	40 62 75
13t October to 31st December	••••	605	177

The above figures relate to the actual number of summonses heard, and do not indicate the total number of adjourned hearings, which approximate to 40 per week.

When the Enforcement Section was inaugurated the Health Committee also decided to set up a Repairs Building Section, and this section has operated very successfully since September, 1947, in carrying out works where Magistrates' Orders have not received compliance. The average cost of these jobs is between £20 and £50. Works at higher cost have been carried out by contractors after the preparation of specifications and the obtaining of estimates which are duly approved by the Health Committee.

Section 275 of the Public Health Act, 1936, permits of the local authority carrying out works by agreement with owners. The desire of owners to use this section shows a decided increase, owing to the fact that owners have experienced great difficulty, through labour and material shortages, in finding builders to comply with Statutory Notices.

Magistrates' Orders in default:

Executed by Repairs Section	 	68	Cost	£643	15	0
Executed by builders after tenders	 	27	,,	£1,284	7	1

Works carried out at request of owners:

By Repairs Section	 	 6	Cost	£176	17	10
By builders after tender	 	 26	,,	£2,777	15	10

Staff

The strength of the inspectorial staff at the beginning and at the end of the year was as follows:—

		January	December
		1947	1947
Chief Sanitary Inspector	 	1	1
Deputy Chief Sanitary Inspector		1	1
Divisional Sanitary Inspectors	 	2	2
District Sanitary Inspectors	 	10	10
Rodent Control Officer	 	1	1
Assistant Rodent Control Officer	 	1	1
Water and Canal Boats Inspector	 	1	1
Assistant Sanitary Inspectors	 	13	26
Pupil Sanitary Inspectors	 	14	5
Enforcement Officer		-	1
Assistant to Enforcement Officer	 		1

Of the 14 Pupil Sanitary Inspectors on the staff on the 1st January, 1947, nine had obtained their certificate during the year.

Special Inspectors

Staff at beginning and end of year:--

			January	December
			1947	1947
Shop Inspectors		 	4	3
Factories Inspectors:				
Senior Inspector			1	1
Inspectors			4	3
Milk and Dairies Inspectors	s:			
Senior Inspectors		 	1	1
Inspectors			2	2
Assistant Inspectors			2	2
			14	12

Offensive Trades

There was no cause to take special action in respect of premises registered for the carrying on of offensive trades during the year, to which sanitary inspectors made a total of 60 visits.

Common Lodging Houses

At the end of the year there were thirteen registered common lodging houses in the City, affording accommodation for 744 males and 46 females. These premises have continued under regular supervision during the year.

Number of houses on register (for males only)	 12
Number of houses on register (for females only)	 1
Number of lodgers allowed	 790
Number of visits	 5 0

Houses Let in Lodgings

At the end of the year there were 369 houses let in lodgings on the register, containing 2,465 rooms. They were let as follows:

Number of lets of single rooms	 949
Number of lets of two or more rooms together	 608
Certified accommodation (persons)	 4,249

There were 82 visits and 119 re-visits paid during the year.

Tents, Vans and Sheds

Few complaints were received during the year concerning tents, vans and sheds, and these have been mostly dealt with by the City Surveyor under the Birmingham Corporation (General Powers) Act, 1929. Five visits were made by sanitary inspectors during the year.

Canal Boats

The number of boats inspected on the canals within the City area was 851.

These boats were registered for the accommodation of $2,704\frac{1}{2}$ persons, and when inspected were found to be carrying 685 men, 528 women and 728 children, represented in terms of adults as 1,577.

Of the 851 boats inspected during the year it was found that 743 or 87·3 per cent. were in good condition and conforming with the Act and Regulations, while in 108, or 12·7 per cent. of the total, various contraventions were found.

Complaint notes were duly served on the owners in all cases. There were 184 contraventions outstanding at the end of 1946, and a further 197 were found during 1947. Of these, 310 were remedied during the year, leaving 71 still outstanding at the end of December.

It has not been necessary during the year to take any Court proceedings under the Act or Regulations.

The number of canal boats on the Birmingham register at the end of 1947 was 600.

Factories Act, 1937

The number of visits paid to factories with mechanical and non-mechanical power totalled 2,526. This number includes visits paid under Section 9 of the Factories Act, 1937, also advisory and routine visits in respect of work in progress as a result of the service of notices. The co-operation with H.M. Inspector of Factories has resulted in joint visits being paid to several industrial premises, to support where necessary applications made by the firms concerned for sanction to rebuild, or instal additional sanitary accommodation.

The survey of premises within the scope of the Factories Act, 1937 continues. The classification figures are as follows:—

Factories with no mechanical	power	 	 	1,032
Factories with mechanical pow	er	 	 ****	5,090

FACTORIES ACT, 1937.

1. INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH (including inspections made by Sanitary Inspectors).

	Occupiers prosecuted (5)	l	1	1	ı	
Number of	Written notices (4)	24	l	270	61	296
	Inspections (3)	152	-	2,286	87	2,526
Mannehow	on Register (2)	1,031	1	5,090	41	6,163
	Premises (1)	(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	(ii) Factories not included in (i) to which Section 7 applies: (a) Subject to the Local Authorities (Transfer of Enforcement) Order, 1938	(b) Others	(iii) Other premises under the Act (excluding out-workers' premises)	TOTAL

2.—CASES IN WHICH DEFECTS WERE FOUND.

Number of	which prosecutions were	(9)		
punof :	red By H.M. Inspector	(5)	27 1 46 258 27	360
Number of Cases in which Defects were found	Referred To H.M. Inspector	(4)	4	4
uber of Cases in	Remedied	(3)	21 1 1 46 417 33	524
Nun	Found	(2)	22 1 2 1 1 67 67 67 44	674
	Particulars	(1)	Want of cleanliness (S.1) Overcrowding (S.2) Unreasonable temperature (S.3) Inadequate ventilation (S.4) Ineffective drainage of floors (S.6) Sanitary conveniences (S.7) (a) Insufficient (b) Unsuitable or defective (c) Not separate for sexes Other offences (not including offences relating to homework)	TOTAL

Na	iture of	Work						No. of out-workers in August list required by Sect. 110 (1) (c)
Wearing apparel:								
Making, etc.								398
Furniture and uphols	tery							4
Electro-plate								64
Brass and Brass artic	eles							311
The making of boxes	or oth	ner rec	eptacle	es or p	arts th	ereof r	nade	
wholly or partial	ly of pa	aper						54
Brush making								42
Feather sorting								1
Carding, etc., of butte	ons, etc	·.						39
Stuffed toys								2
	TOTA	AL						915

Rodent Control

Rodent control has continued on the general lines laid down in previous reports, the investigation of complaints, the maintenance treatment of the city sewers and the treatment of major infestations providing full time employment for a staff of 25, which includes two rodent officers, two Public Works Department sewermen and a clerk. In addition the Rodent Control Section undertakes the work for the Salvage, Public Works; Estates, Gas, Education and Parks Departments, both in institutions inside and outside the city.

I. Complaints

Complaints received during the year were 2,633, an increase of 716 compared with the previous year. All complaints were investigated, and treatments were given in 2,395 cases, of which 1,486 were domestic and 909 industrial premises. After treatment, 2,247 dead rats and 530 dead mice were picked up.

Domestic treatment has continued to be a free service while industrial premises have been charged on an approved scale.

II. Sewer Treatment

The regular maintenance treatment of the sewer system has continued, and two complete treatments have been given during the course of the year, involving between 600 and 700 miles of sewers.

A summary of the work carried out is as follows:—

mannoies on system		 			11 1- 4	4,100	
Manholes test bait	ed	 			1	1,222	
Manholes poisoned		 			1	1,222	
Materials used.				Tons	Cwts.	Lbs.	
Sausage rusk .		 		2	19	51	

III. Destructors

Zinc phosphide

Manholes on system

With the continued co-operation of the Salvage Department regular inspections of the five destructors have been carried out, though it was only found necessary to treat the Montague Street and Brookvale destructors during the year. The rat population at Tyseley, Rotton Park and Lifford has been minimal.

10

Montague Street destructor was closed for repair in July and the opportunity was taken to plan a wholesale clearance of the rodent population. Treatments were given in July and August, and it is estimated that between 9—10,000 rats were killed, the majority by poison, but about 500 being killed by hand during the turning over of salvaged material.

In October the Brookvale destructor was treated, with an estimated kill of over 6,000 rats. Re-inspection of the destructors showed that the number of rats remaining was extremely small, although owing to the food and cover available, it is practically impossible completely to free this class of premises from vermin.

The materials used in the treatment of the Montague Street and Brookvale destructors were:—

				Cwts.	Lbs.
Sausage rusk	 			7	32
Zinc phosphide	 ••••	 *****	 		$8\frac{1}{2}$

During the year requests have been received from the Biology Sections of the University, Technical College and the Ministry of Food for live rats for experimental purposes, and in all cases the Section has been able to provide help in this direction.

Supervision of Shops

At the beginning of the year a full staff of four whole-time Inspectors were available to carry out the work of inspection in relation to the undermentioned legislation, but from 20th March the staff was reduced to three by the illness and untimely death of the Senior Shops Inspector, and this vacancy still remains unfilled.

Shops Act, 1912.

Shops Act, 1913.

Butchers' Closing Order, 1921.

Shops (Hours of Closing) Act, 1928.

Shops Act, 1934 (Employment of Young Persons, etc.).

Shops (Sunday Trading Restrictions) Act, 1936.

Shops Act, 1936.

Young Persons' Employment Act, 1938.

Defence Regulation 60 AB modifying the Shops (Hours of Closing) Act, 1928, was in operation from the beginning of the year until 1st March, and again from 2nd November until the end of the year.

The work of the Shops Act Inspectors during the year is summarised as follows:—

- 000	eral Inspections									
ren	X7:-:4-									6.014
	Re-visits		••••	•••••						6,014 5,253
	ICE-VISITS	••••		••••						3,233
Бре	cial Visits:									
	No. of streets	patrolle	d by d	ay (191	2 Act)		*****			1,161
	No. of streets	-	•	٠,	,					486
	No. of streets p						Restrict	ion Act		739
	No. of streets									311
	Sunday visits (-	_	٠,						883
	Trinian Temples			Ŭ		ŕ				00
	Visits, Jewish t			.		••••	••••		••••	32
	Visits, re closin						• • • • • • • • • • • • • • • • • • • •	••••		1,447
	Appointments						••••		•••••	115
	Visits by night	, Deten	ce Reg	ulation	60 A.1	3.	•••••		•••••	534
		0	CCCN	CES E	EDOD	TED,	ETC			
							EIC.			
	Early closing n				•					1,056
	Assistants' wee						•	912 Act	:)	724
	Sunday Tradin	_					oited		••••	730
	Exempted trad				•					351
	Not providing				,	1912 A	ct)			23
	Not closing to	time (h	alf day	r), (191	2 Act)					148
	Not closing to	time (e	venings	s), (192	8 Act)					24
	Not closing to	time (e	venings	s), (De:	fence R	egulati	on 60 A	A.B.)		153
	Not closing Sur	ndays (Shops .	Act, 19	36)					23
	Young persons	notices	not ex	hibited	l, Form	H (193	34 Act)			503
	Young persons									529
	Not exhibiting	Form :	K (Sea	ting Ac	commo	dation)	, (1934	Act)		656
	Young persons	notices	not ex	khibite	d, Forn	ı J (193	34 Act)			21
	To provide W.	C. acco	mmoda	ition (1	934 Ac	t)				4
	To provide suit	table ve	entilati	on (193	34 Act)					3
	To provide acc	ommod	lation f	for mea	ıls (193	4 Act)				6
	To provide was	shing fa	cilities	(1934	Act)					1
	To provide hea	ting fac	cilities							7
	Mess-rooms to	be clea	nsed		🌘					2
	Nuisances repo	rted			•					215

During the year 144 warning letters were sent to shopkeepers contravening the Shops Acts, and in general these had the desired effect.

Visits to work in progress

125

Legal proceedings were commenced in December against a firm of hair-dressers for failing to observe the weekly half-holiday provided by Section 4 of the Shops Act, 1912, in respect of two of their establishments, and a fine was imposed by the magistrates in each case.

Considerable difficulty was experienced during November and December, in enforcing Defence Regulation 60 AB, as during this period no Order was made by the local Shops Act Authority extending the wartime closing hours. The working of the shift system in factories, and the employment of large numbers of women in industry made the purchase of essential food stuffs a problem during the authorised hours, especially in the outlying areas of the City, and an effort was made by the Shops Act Inspectors to ensure that all general shopkeepers were fully aware of their duties under this Regulation.

Smoke Abatement

A major qualification of a Smoke Inspector is that he should be competent to show the man on the firing floor the appropriate method of hand-firing to suit both the fuel available and existing furnace conditions. By demonstration of practical methods it can be shown that care and attention to the elementary principles of combustion result in the reduction of smoke emission to minimal and negligible proportions, and much of the Inspector's time is occupied in this way.

Several large firms have, during the year, converted coal-burning industrial plant to oil-fuel. Boiler-plant has mainly been concerned with such conversion, but a number of re-heating furnaces also have changed over, in view of the coal supply position.

Oil is an excellent smokeless fuel provided the stoker furnaceman controls the burner and air supply with due skill and attention. In unskilled or inefficient hands, however, the emission of dense black smoke is inevitable.

Another interesting development has been the application of chaingrate mechanical stokers to the Lancashire boilers at a large laundry. This plant has been burning fuel of a low calorific value and high ash content quite successfully with a minimal smoke haze at the chimney top.

Close co-operation exists between the departmental Inspectors and the regional fuel engineers of the Fuel Efficiency Section of the Ministry of Fuel and Power, whose aim it is to prevent waste of fuel in industry. As supplies become more plentiful, and the cleaning, grading and classification of fuel improve, the use of mechanical stokers, especially to small boiler plant, should be encouraged.

Fumes

The complaints dealt with arose from various industrial processes such as cellulose and paint-spraying, sulphuric acid and caustic soda vats, hot-tinning processes and the mixing of ceiling-white. On inspection it was generally found that the outlet for fumes had been placed in a position

adjacent to dwelling houses and required the introduction of hoods, trunking and extractor fans to disperse the fumes at higher levels and away from living accommodation.

Noise

Under the Birmingham Corporation Act, 1935, Section 58, limited powers are available in relation to noise abatement. Amongst the matters dealt with under this Section have been complaints from tenants of houses affected by noise, often associated with vibration, from the working of air-compressors, high speed extractor-fans, shaking-barrels and faulty gearing on rotary mixing machines. This inspectorial work is mainly of an advisory character, each case having to receive individual consideration. By discussion and co-operation with the various managements concerned, remedial measures have been adopted reducing to a considerable extent the recurrence of complaint.

Swimming Baths

Close supervision of the following baths has been continued:—

Corporation swimming	baths	 	 	 24
Education Departmen	t Institutions	 	 	 3
Private open air baths		 	 	 1
Orphanage and school		 	 	 1
Approved school			 	 1

With regard to the Corporation baths, 200 bacteriological and 200 chemical samples were taken during the year and the results were generally very satisfactory. In 20 instances the total bacterial count was rather higher than usual, and in 7 cases B.coli were detected. These adverse results were in the majority of cases associated with a deficiency of free chlorine in the water, though in some instances the free chlorine was within the usually accepted limit of 0.2-0.5 p.p.m. Under the heavy bathing loads often associated with a large school class undergoing swimming instruction it seems doubtful whether these limits of free chlorine are sufficient to effect a rapid destruction of pathogenic organisms, and during the final months of the year a higher chlorine figure was maintained with very satisfactory results. The difficulty remains, however, of maintaining an adequate free chlorine level in a bath which takes on a variable bathing load throughout the day.

Samples from 5 baths in institutions (three educational, one orphanage and one approved school) were taken during the season and of the 17 bacteriological samples, 8 gave a high count, 6 showed the presence of B.Coli and 1 the presence of B.lactis aerogenes. All these adverse results were associated with inadequate chlorination in baths which still use the system of hand chlorination, an unsatisfactory method when the load of bathers is both intermittent and variable.

One bath belonging to a private firm was supervised at monthly intervals throughout the year, the results being very satisfactory.

Louse Infestation

The numbers of cases treated at Bacchus Road Cleansing Station and Bromford Head Clinic are set out in the following table:—

		Males		Fem	ales	Children		
		Head	Body	Head	Body	Head	Body	
		Lice	Lice	Lice	Lice	Lice	Lice	
1944	1000	3	468	182	54	_	_	
1945	1.00	2	622	133	47		_	
1946		1	574	120	42	62	34	
1947			567	97	18	14		

There is no really reliable method of estimating the degree of louse infestation in the adult population of the City. The cases treated at Cleansing Stations represent a selected population, many of them being drawn from the common lodging houses and night shelters, and a number of reinfestations occurred.

No changes were made in the methods used for the treatment of lousiness, which continued to give excellent results.

Scabies

The number of treatments given at Scabies Centres showed a very marked decline during 1947, and only 7,432 cases were treated compared with 14,871 cases during 1946. The former figure gives an average weekly attendance of 143.

The Scabies Centres at Witton Isolation Hospital, Chequers Walk, Bromford and Stirchley were closed down during 1947, and four centres remained open at the end of the year.

The general arrangements for ascertainment, treatment and the following up of contacts have continued without any substantial alteration.

	TREAT	MENT OF SCABI	ES	
Clinic	Men	Women	Children	Total
Bacchus Road	550	613	535	1,698
Floodgate Street	1,103	_	69	1,172
Sheep Street		1,020	861	1,881
Witton Isolation	118	157	126	401
(Closed April, 194	7)			
Chequers Walk		91	78	169
(Closed Feb., 1947))			
Little Bromwich	271	533	581	1,385
Bromford	123	134	91	348
(Closed July, 1947))			
Stirchley	68	129	181	378
(Closed July, 1947)			
Total (1947)	2,233	2,677	2,522	7,432
Total (1946)	4,219	5,496	5,156	14,871
Total (1945)	3,852	6,570	6,140	16,562
Total (1944)	5,519	9,588	9,158	24,265

Disinfection

The following table gives details of the work done during 1947:

Houses	disinfected	after	small po	x				6
Houses	disinfected	after	scarlet f	ever	•		••••	-
Houses	disinfected	after	diphthe	ria	••••	•		
Houses	disinfected	after	enteric f	ever	••••			1
Houses	disinfected	after	tubercul	losis				1,459
Houses	disinfected	after	cancer (on re	quest)			3
Houses	disinfected	after	miscella	neous	diseases	(on	request)	1,087
Beds dis	sinfected	••••	••••				•	445
Miscella	neous artic	les of	clothing	and	bedding	disin	fected	25,310
Library	books disir	fecte	d	•			*****	
Public c	onvevances	disin	fected					

SECTION D

HOUSING

Whilst sound foundations have been laid during the year for the future improvement of housing conditions in the City, it is doubtful whether, on balance, the conditions at the end of the year can be said to be substantially better than at its beginning. The vigorous efforts towards improvement have necessarily been offset by the lack of a sufficiency of new houses, and the effects of the deterioration of existing property.

The greater part of the inner wards of the City consists of houses between 60 and 120 years old. Faults in original design and layout cannot be dealt with at present on a large scale, although there is scope for highly important minor improvements, in relation, for example, to the installation where necessary of a water supply.

While faults in design remain static, this cannot be said of condition. Maintenance work can go far towards arresting deterioration due to age; but if, as is only too often the case, it is neglected, the results are disastrous, affecting the occupants adversely and ultimately reducing the number of houses available. Reference to the particulars of Housing Act action set out on page 100 will show that 78 houses fell into such a state of dilapidation or structural insecurity that despite the acute housing shortage action had to be taken to deny further occupation.

The procedure for the service of Notices requiring the abatement of nuisances has been under review, and the difficulties arising from shortage of staff, of labour, and of materials, have been in a degree met by a revision of administrative practice, coupled with automatic enforcement action in the Courts or, alternatively, by default action.

The steps towards acceleration of the more urgent repairs by the definition of a schedule of defects, to be pressed for prompt completion, with postponement of requirements for the time being of less urgent items, did not allow for Notices requiring the installation of separate internal water supplies. This latter item was again reviewed later in the year, when it was decided that the ill effects of a lack of water supply justified resumption of action in this direction on a modified scale, to embrace some 1,000 properties per annum. This should enable this problem substantially to be cleared within a few years.

Within the Re-development Areas mentioned in detail on page 102 more effective control is possible, as it has become the policy of the Corporation to acquire within five years practically the whole of the dwelling-houses affected. Whilst acquisition is necessary as a prelude to the redevelopment, the actual clearance may have to be spread over a number of years, with the result that, pending such clearance, all the houses acquired are to receive at least that degree of beneficial management

which would be expected from a good owner. Included in the boundaries of the Re-development Areas are 2,858 occupied houses in respect of which official representations were made before the war, and it is intended that the whole of these shall be acquired, and therefore brought under Corporation control, within two years.

At the time of vesting or acquisition a schedule of repairs on a minimal scale is drawn up by the departmental housing staff. This schedule is related to the potential life of the property, when information on that point is available; and it is passed to the Central Areas Management Department where it is accorded the same weight as a Nuisance Abatement Order. The schedule then forms the basis of a specification of works, being added to where justified by considerations of good management. Prices are then obtained and the work is put in hand. During the progress of this routine operation, which may take a month or two, urgent matters found on inspection are referred to the Central Areas Management Officer who takes any necessary steps immediately.

At this stage it is not intended that works of improvement in design or accommodation shall be carried out, save only by installation of water supplies and the provision of additional W.C.s in selected cases. As soon as the scheme has progressed sufficiently, and the supply position has eased, schemes of improvement are to be applied to all suitable houses with a sufficient potential life.

In view of the magnitude of the Re-development Areas, action as outlined cannot fail to have a beneficial effect on the housing situation in the City as a whole, and when general conditions permit it is likely to be followed by like action in respect of similar aggregations of property outside the ambit of the Re-development Schemes.

On the question of housing accommodation as a whole, the effects of the national situation have had a retarding effect on the production of new houses, but even so the progress made in the City has been considerable. The annual figures are quoted *in extenso* on page 99, but it may be noted that in the years 1945–1947 the number of new houses erected and houses re-built totalled 6,259, compared with 3,414 in 1919–1922.

During the year the entries in the application register of the Estates Department rose by 10,959 from 50,787 to 61,746, this despite the rehousing during the year of 3,591 cases, 2,445 of these being direct "lets" by the Estates Department. In his report of 28th July, 1947, the General Manager of the Estates Department analysed the application register and quoted that 52% of the applicants were married couples without children, living in rooms. It is to be assumed that many of these couples desire a house in order to establish a family.

New Houses

During the year 1,493 traditional type houses were built, 826 by the Corporation and 667 by private enterprise. In addition 1,333 temporary bungalows were erected by the Government in pursuance of the National Scheme for meeting the immediate housing need. The work of re-building houses thrown out of use by war damage was actively pursued and during the year 354 houses were re-built under private enterprise and 111 by the Corporation. Accommodation has also been increased by the conversion of existing houses into flats and during the year private enterprise yielded 72 additional habitations, whilst the Corporation carried out conversions yielding 102 additional habitations of the class "B.2" type.

I am indebted to the City Engineer and Surveyor for these figures and also for the fuller information covering the period since the end of the last war set out below:—

			HOUSES ERECTED	Governmen	
		By Private	By the	Temporary	Total
Year	 	enterprise	Corporation	Bungalows	
1919	 	29			29
1920	 	244	553		797
1921	 	426	970	_	1,396
1922	 	382	810		1,192
1923	 	556	1,621	_	2,177
1924	 	1,201	2,004		3,205
1925	 	1,774	3,215	. —	4,989
1926	 	1,775	5,159		6,934
1927	 	2,445	4,007		6,452
1928	 	1,487	3,505		4,992
1929	 	2,456	4,359		6,815
1930	 	1,738	6,687		8,425
1931	 	1,983	3,893	_	5,876
1932	 	2,159	1,703		3,862
1933	 	3,028	2,029		5,057
1934	 	4,226	837		5,063
1935	 	6,265	985		7,250
1936	 	6,926	2,285	_	9,211
1937	 	7,662	2,643		10,305
1938	 	7,804	3,003		10,807
1939	 	5,178	1,413		6,591
1940	 	1,183	302		1,485
1941	 	181	10		191
1942	 	26	63		89
1943	 	5	35		40
1944	 	37	2		39
1945	 	25	6	325	356
1946	 *****	550	413	1,475	2,438
1947	 	667	826	1,333	2,826
		62,418	53,338	3,133	118,889
		-		-	

These figures do not include houses rebuilt after war damage nor flats provided by sub-division of larger houses.

Housing Act, 1936

During the year no representations were made in respect of Clearance Areas, but further action in respect of all previously represented Clearance Areas lying within the boundaries of the areas covered by the Birmingham Central Re-development Order, 1946, will be in application of that Order. The vesting of all the houses thus affected will be accomplished in less than two years. In all 3,024 houses previously represented are at present standing, 2,858 of them still occupied.

Outside the boundaries of the Re-development Areas there are also a number of Clearance Areas where action was suspended before the orders had become operative. These include 408 houses at present standing, with 332 still occupied. Seven of these areas, covering 116 houses, 95 of which are occupied, are to be purchased by the Corporation under Part V of the Housing Act, 1936, compulsorily if necessary. Certain houses, to a total of 89, previously regarded as unfit for human habitation or included in Housing Compulsory Orders as "grey" properties, were re-occupied during the war years, after the execution of works on a limited scale, under the authority of apposite Ministry of Health circulars.

As soon as conditions permit, radical action with a view to clearance, will need to be taken in respect of the aggregations of unfit houses not covered by the Re-development Schemes. First attention will have then to be given to the areas previously represented, subject to fulfilment of the condition precedent to the operation of a Clearance Order or Housing Compulsory Purchase Order under the Housing Act, 1936, viz., the provision of accommodation equivalent to that demolished.

Individual action has continued to be restricted most severely, and in many of the cases taken the buildings were on the point of collapse or were totally unsuited to, and in some cases not intended for, occupation by human beings. The following table gives particulars of such action in its several categories:—

Proceedings under Sections 11 and 13 of the Housing Act, 1936.

1.	Number of dwellinghouses in respect of which official Representations were made	85
2.	Number of dwellinghouses in respect of which undertakings under Section 11 (3) were accepted:	
	(a) Not to use for human habitation	7
	(b) To carry out works to render fit for human habitation	2
3.	Number of dwellinghouses in respect of which Demolition Orders were made	56
4.	Number of houses demolished in pursuance of Demolition Orders	69

Proceedings under Section 12 of the Housing Act 1936.

1.	Number of parts of buildings or separate tenements in respect	
	of which official Representations were made	11
2.	Number of parts of buildings in respect of which Closing Orders	
	were determined, the part of building having been rendered	
	fit	1
3	Number of parts of buildings or underground rooms in respect	
	of which Closing Orders were made	15

At the close of the year 239 houses urgently represented as unfit for human habitation, were affected by non-user undertakings or by Closing Orders. These are visited periodically to ensure that the restriction on use is observed. Defence Regulation 68 A.A. authorises the issue of licences to enable houses on which Closing Orders or Demolition Orders were in operation to be used for human habitation despite the prohibition contained in Section 155 (3) of the Housing Act, 1936, provided that maintenance is continuously of a standard to satisfy the Local Authority. These licences are for 6 monthly periods, and are reviewed before renewal. Two houses were thus occupied at the end of the year. Under the authority of the Ministry of Health Circular 1,866 of 8th September, 1939, 23 houses remain in occupation despite the fact that action has been taken with a view to demolition or closure and orders made. These houses are inspected regularly to ensure that conditions are maintained at a proper level.

Town and Country Planning Act, 1944. Re-development

The application of the Corporation to the Minister of Town and Country Planning for confirmation of the "Birmingham (Central Redevelopment) Compulsory Purchase Order, 1946" was dealt with at a Public Local Inquiry held in July, 1946, and has resulted in confirmation by the Minister of the Order sought, with exclusions either minor in character or agreed by the Corporation. The effect of this Order is that the Corporation now have power to acquire the whole of the properties mentioned therein and to undertake Re-development in an ordered manner. For convenience I set out in tabular form brief particulars of the five Areas referred to in the Order.

The Order was received under date 26th June, 1947, and by entry in the Local Lands Charges Register the date August 14th, 1947 was fixed as the date on which the condition of properties later to be vested would form the basis of any compensation ultimately to be paid. In respect of the bulk of the properties in the Areas the Order provides that the accelerated Vesting Procedure mentioned in the Town and Country Planning Act, may be applied, and the first Vesting Declaration, covering 322 dwelling-houses, was made on 31st October, 1947, while by the end of the year over 1,200 dwelling-houses within these Areas were already in the hands of the Corporation.

BULK PARTICULARS—BIRMINGHAM (CENTRAL RE-DEVELOPMENT) COMPULSORY PURCHASE ORDER, 1946.

	1													
Total	29,526 554	1,380.98	641.3	46.0	90,002	3.0	936	2.1	504	23,843	79-27	18,185	3,879	19,821
No. 5 Gooch Street	4,125	236.78	110.7	37.3	13,809	3.3	132	2.1	66	3,241	76.8	2,141	651	2,758
No. 4 Bath Row	4,249	191.00	87.4	48.6	12,185	2.8	97	2.2	32	3,856	89.3	3,143	386	3,290
No. 3 Lady- wood	7,174	288-20	127.0	56.4	18,787	2.6	211	2.91	160	6,260	85.7	4,960	540	5,272
No. 2 Summer Lane	8,694	398-37	180.5	48.2	27,611	3.1	315	3.52	114	6,625	74.5	5,337	1,148	5,169
No. 1 Duddeston & Nechells	5,284	266.63	135.7	38.9	17,610	3.3	181	3.3	66	3,861	72.1	2,604	1,154	3,332
	Total number of dwellings (a) Normal houses (b) Caretakers, etc	Gross area in acres	Nett housing area in acres	Density of houses per acre	Population	Number of persons per dwelling	Number of cases of overcrowding	Percentage of such cases to total houses	Number of houses with two or more families Number of dwellinghouses regarded as unfit	within the meaning of the Housing Act,	Percentage of unfit houses to total number of houses	Number of back-to-back houses	Number of houses without separate water supply	Number of houses without separate sanitary accommodation
	Total (a) (b)	Gro	Net	De	Po	ž	Ź	. Pe	ŹŹ		Ď.	Ź	ž	Ź

Housing Survey and Overcrowding

The results of the Housing Survey of Birmingham undertaken in 1946, and mentioned in my last Annual Report, were reported to the City Council on April 1st, 1947, when it was decided to refer them to the Public Works and Estates Committees for the purpose of their respective delegations. In the case of the Public Works Committee advantage was taken of the information given to relate the house building programme to the need for houses disclosed by the Survey, and within this need to the correct proportioning of houses with varying degrees of accommodation. In the case of the Estates Committee, the results were compared with the mass of information already in the possession of the Estates Department, and the Estates Committee joined with the Public Works Committee in recommending to the City Council that 25% of all new houses provided by the Public Works Committee should be allocated for the accommodation of persons to be displaced in the process of clearing portions of the Redevelopment Areas, the position to be reviewed early in 1948.

Abatement of overcrowding has occurred principally as a result of action by the Estates Department in allocating houses to families living in bad conditions, a high proportion of these being overcrowding.

During the year it became evident that the advantages accorded by relieving an overcrowded sub-tenant family in a larger house might be abused, in allowing of re-crowding by entry of another family intending later to apply for accommodation on the grounds of overcrowding. This position has been met by attaching a condition that points shall not be awarded to overcrowded cases unless the family concerned has been in residence under those conditions for at least two years. Further, notification of acceptance of an offer of other accommodation to an overcrowded family is followed up by a letter of warning to the principal tenant of the house concerned, pointing out that re-crowding would constitute a punishable breach of the relevant sections of the Housing Acts. This letter is followed up by subsequent inspections by officers of the Public Health Department. As a result, no re-crowding of this nature has since been found.

Certain provisions of the Housing Act relating to overcrowding are required to be printed on the rent book of a tenant and in the same manner the "permitted number" for the letting must be clearly shown. During the year applications for information as to permitted numbers were made by owners or agents in respect of some 5,000 houses; and there is every indication both that persons managing properties are aware of the provisions of the Housing Acts dealing with overcrowding, and also that there is every intention on their part to prevent overcrowding on letting a house or a part of a house.

Many applications have been received during the year from families seeking alternative accommodation, mainly on the grounds of overcrowding, illness, sanitary defects or a combination of these circumstances, with a request that their living conditions should be considered as special cases and take priority over the points scheme. In the comparatively small number in which this was confirmed, the full details, together with an appropriate recommendation, were passed to the Estates Department for their special consideration.

During the year 1,300 cases were thus investigated compared with 1,304 during 1946.

Special consideration has been given to the households of patients suffering from active and infectious pulmonary tuberculosis. Reference to this is made in the Section dealing with tuberculosis on page 161.

SECTION E

INSPECTION AND SUPERVISION OF FOOD

Food Premises

There are 832 "Eating Houses" registered under Section 54 (1) of the Birmingham Corporation Act, 1935. These include restaurants, cafes, snack bars, etc., but exclude clubs, licensed houses and other premises which are subject to inspection only.

Inspection under Section 13 of the Food and Drugs Act, 1938, is carried out by the District Inspectors. With the increase of trained inspectorial staff during the year, this work has been intensified.

Plans of extensions to premises are forwarded by the City Surveyor for consideration. This arrangement has led to the prevention of sanitary defects in many cases, and at the same time to a saving in cost to the occupier. The Department is in touch with the Food Executive Officer for similar consultation in respect of proposed new premises, in view of the prime importance of suitability of premises for such a purpose.

Efforts are made to promote a greater understanding of the need for hygienic practice amongst persons handling food. Plans have been prepared, moreover, for the launching in 1948 of an educational campaign throughout all sections of the food trade, in order that, by education of the food handler in particular, and of the public in general, the risks of infection from contaminated food and drink may be more fully recognised and eliminated.

Ice Cream

The Ice Cream (Heat Treatment, etc.), Regulations came into force on 1st May, 1947. The staff concerned have devoted much time to explanation and advice as to how the small manufacturer can best conform to the regulations. In spite of the difficulties of compliance, there has been general evidence of a desire on the part of the trade to co-operate.

The first and most obvious result of the regulations has been that the small manufacturer who had been persuaded previously to boil his "mix," was driven back to making a "cold-mix" because his business was too small to justify indicating and recording thermometers, etc. Experience has shown, however, that the regulations in respect of cooling can be readily complied with by the small manufacturer without the provision of additional apparatus. All "hot-mix" manufacturers have provided the necessary indicating thermometers and the majority have already ordered recording thermometers, in preparation for the day when their use becomes obligatory.

The detail of the Inspectors' work is as follows:—

Number of registered, unregistered and prop	osed	ice cr	eam					
manufacturing premises visited				326				
Premises found unregistered				5				
Premises unsuitable for manufacture				31				
New premises erected				17				
Premises in course of erection or awaiting sanction 8								
Alterations to registered manufacturing premises				12				
Alterations to unregistered manufacturing premis	ses			6				
Premises where sterilising facilities were required				12				
Premises with minor sanitary defects				9				
Samples taken for chemical analysis				42				
Samples taken for bacteriological investigation				326				

In a number of instances a recommendation for the erection of new and separate manufacturing premises has failed to gain the necessary building licence, and the would-be manufacturer has been obliged to sub-let his allocation of ingredients from the Ministry of Food and retail only the product of some other trader.

Fifty-seven manufacturers' licences were cancelled during the year, 28 ceasing to manufacture and sell, and 29 becoming retailers only.

One firm was prosecuted for manufacturing, and for selling, ice cream on unregistered premises.

The samples taken gave the following results:—

Chemical Analysis

			No. of	Solids		No. of
Fat %			samples	not fat %		samples
Less than	1		9	Under 15	 	1
12		 	13	15—20	 	3
24			13	20—25	 	19
48			4	25—30	 	15
810		 	2	30—35	 	4
Over 10		 	1			

Thirty-nine out of 42 samples contained starch.

The low percentage of fat in the great majority of samples was due to dilution of the ingredients so as to make a greater quantity of ice cream available for sale.

The high percentage of starch serves to give body to the other ingredients and stiffen the much diluted mixture. It is to be noted that the addition of farinaceous matter by the manufacturer is permissible only in a mix subjected to heat treatment, whereas it would have to be present in the "Complete Cold Mix" supplied to the "cold mix" manufacturer.

Bacteriological Examination—Methylene Blue Test

Provisional Grade I	 	 	 		44.8%
II	 	 ••••	 ••••	•••••	25.1%
III	 		 • • • • •		15.3%
1 V					14.7%

Although about 30% of these samples failed to fall into Grades I and II, it is likely that failures were largely due to inexperience in sterilising equipment efficiently, and to the practice of switching off refrigerators overnight, thus allowing temperatures to rise above the 28°F. required by the regulations. Detailed investigations were made in every case and advice given until satisfactory samples were obtained. Another likely cause of failure is the fact that the most popular "cold-mix" is supplied only in tins containing 28 lbs. so that one tin may have to last for many weeks in the case of the small manufacturer.

Milk and Dairies

Principal Licences

Su

	1945	1946	1947
Number of wholesale purveyors	63	61	5 9
Number of retail purveyors	161	139	136
Number of milkshops	1,772	85	76
Number of bottled milk purveyors	4,316	2,841	2,823

Milk (Special Designations) Regulations, 1936-46

Producers of tuberculin tested milk			2
Dealers in tuberculin tested milk			26
Producers of accredited milk			15
Dealers in accredited milk	••••	*****	5
Producers of pasteurised milk (Holder process)			8
Producers of pasteurised milk (H.T.S.T. process)		****	6
Dealers in pasteurised milk		••••	5 0
·			

ipplementary Licences					
Dealers in tuberculin tested	milk				 8
Dealers in accredited milk					 3
Dealers in pasteurised milk					 3
		Тота	L	••	 126

One firm is in the process of changing over to the H.T.S.T. method of pasteurisation. Difficulty in obtaining materials and equipment continued, so that the alterations and improvements remained a problem. Worn-out plant cannot invariably be worked efficiently and this is reflected in the phosphatase test results. A good standard of milk sold was, however, maintained.

Routine inspection and sampling under the Milk and Dairies, and Milk (Special Designations) orders were carried out, and samples of milk sold in the City from plants approved by the Ministry of Food for the production of heat-treated milk were also taken throughout the year.

Seven hundred and twenty-two samples of designated milk were taken, $2\cdot1\%$ failing by reason of the presence of B.coli, and $3\cdot3\%$ failing in the methylene blue test. In the case of pasteurised milks $3\cdot5\%$ failed to pass the phosphatase test.

Fifty-nine complaints in respect of milk were received and investigated during the year, as compared with forty-four in 1946 and sixty-four in 1945. These were classified as follows:—

Dirty bottles and foreig	n ma	tter in l	oottles	 	 	42
Souring				 	 	14
Overcooked sterilised				 	 	1
Vinegar fly infestation				 	 	2

The dirty bottle is thus again the chief cause for complaint. The trouble begins in the home, in the school and in the factory, for it is exceptional in any dairy to find a bottle which appears clean going into the bottle washer. In many the film of milk has dried on to the glass, and when the "empty" has been exposed to fouling by dust and by animals on the doorstep or at the road side as well, it is inevitable that mechanical washing, however well it may be supervised, must inevitably convey a number of doubtfuls to the bottle filler.

There is another factor, one which was noted a year ago, and persists to-day, e.g., the depositing of crates of empties at the side of the road for collection and return to the dairy later. Though most co-operative in every other aspect of milk production, the trade in general appears not to find it easy to give up a procedure which developed as a means of saving transport, but which is of sufficient prejudice to the production of clean milk to warrant its discontinuance. Souring must always be associated with dirty bottles, but the condition of samples of raw undesignated bottled milk, and of bulk tanker milk arriving at the larger dairies for processing, also leaves much to be desired. Results of their sampling were as follows:—

- (a) Of 31 samples of raw milk sampled during the months of November and December, 14 showed B.coli present in 1/100th cc. and 4 failed to pass the methylene blue test carried out as for accredited milk.
- (b) Over the year, 49 samples of bulk milk were taken on arrival at pasteurising establishments. Of these only 2 showed no B.coli in 1/100th c.c., while only 10 passed the methylene blue test carried out as for accredited milk.

Synthetic Cream

Routine sampling of synthetic cream received at bakeries from the suppliers to the area showed the following results:—

Bacterial		$B.{\it coli}$	
Count.	No.	present per 1 c.c.	No.
Under 1,000	 58	Nil .	 7 0
1,000 to 10,000	 11	Under 10	 2
10,000 to 100,000	 5	10 to 100	 1
100,000 to 500,000	 1	100 to 1,000	 2

No instance of infection was recorded as traceable to the consumption of contaminated synthetic cream.

Inspection of Cows and Cowsheds

Extracts from Report by Mr. C. G. Allen, M.R.C.V.S., Chief Veterinary Officer.

City Dairies

The Milk and Dairies Orders require the registration of cow-keepers and enforcement of general requirements as to structure and cleanliness of cowsheds and precautions to be taken in connection with the milking of cows.

At the end of 1947 there were 39 dairy farms housing 691 milch cows in 96 registered sheds, viz.:—

Attested herds	 	 	 	 2
Tuberculin Tested herds		 	 	 1
Accredited herds	 	 	 	 14
Non-designated herds	 	 	 	 22

A monthly inspection has been made of all city cowsheds and dairy cows, and during the year 1,197 visits were made by veterinary inspectors.

Part IV. Agricultural Act, 1937.

Veterinary inspections of City dairy herds were made on behalf of the Ministry of Agriculture and Fisheries, and certificates issued as follows:

Accredited herds	Cows examined
34	674
Non-designated herds	
31	394

Dairy Herds

Despite shortage of labour, and other post-war difficulties, the health and cleanliness of the cows in the City dairies remains good. The cows are regularly examined, with a view to preventing danger to health from the sale of infected, contaminated or dirty milk, and in particular, for prohibiting the supply or sale of milk suspected of being infected with tuberculosis.

Mastitis

During the year 65 cows were found to be affected with acute catarrhal mastitis, and the milk produced from these cows was prohibited from sale.

Tuberculosis

In addition to the clinical examination of the dairy cows bulk samples of milk were taken from each City dairy herd during the year, and individual samples from suspected cows.

				Taken	Infected
Mixed samples from Dairy Herds		****		39	1
Individual samples	*****	••••	*****	3	1

As a result of clinical examination, four cows affected with tuberculosis were removed from the City dairy herds during the year and dealt with under the Tuberculosis Order.

In addition, at the request of the Ministry of Agriculture and Fisheries, post mortem examinations were made on seventeen cows dealt with under the Tuberculosis Order and sent to the City Meat Market from farms outside the City.

Inspection of Cowsheds

Regular inspection has been maintained of all registered cowsheds, attention being paid to the provisions of the Milk and Dairies Order for securing adequate lighting, ventilation and a clean water supply, also the cleansing of cowsheds and removal of dung and offensive matter.

In spite of labour shortage all cowsheds have been limewashed or sprayed with lime at least twice during the year.

Milk and Dairies (Consolidation) Act, 1915

In connection with the ascertainment of the source of supply of milk, the consumption of which is likely to cause tuberculosis, notification under Section 4 of this Act was sent in 84 cases to the Medical Officer of Health for the county or county borough in which the cows yielding the milk were kept.

Examination of Milk coming into the City from Outside Sources for the Presence of Tubercle Bacilli

The system is to sample each source of supply and samples are obtained at depots from raw milk before heat treatment.

Milk supplies are handled mainly by large milk depots. The following gives the approximate number of City milk depots and farmer producers supplying milk to the City from outside sources:—

Depots	Farmer pr	oducers
The three largest depots receive supplies from	 approx.	1,980
Six City depots receive supplies from	 approx.	900
The fourteen remaining depots receive supplies from	 approx.	140

3,020

During the year, owing to difficulties at the laboratory, we were able to submit two dozen samples only per week until during August, when we resumed the normal quota of four dozen samples per week. The following return shows the number of samples of milk taken during 1947. Each sample represents the mixed milk of the cows of a single herd.

			Samples taken		Samples	No. of $T.B$.
Source			at	Depots, etc.	infected	Cows traced
Derbyshire				25	1	
Gloucestershire				17	_	
Herefordshire				13	1	1
Leicestershire				57	4	5
Shropshire				162	9	9
Staffordshire				405	36	23
Warwickshire				7 07	27	27
Worcestershire				273	6	9
			_			
				1,659	84	74
City Dairies (Bul	.k)			39	1	
City Dairies (Ind	ividua	.1)		3	1	1
			-			
				1,701	86	75
Pasteurised (To t	est pla	ant)	•	3	_	
			_	1,704	86	75
			-			-

As a direct result of sampling milk for the presence of tubercle bacilli, 75 cows giving tuberculous milk were removed during 1947 from dairy herds supplying milk to Birmingham.

At eleven farms the investigations had not been completed at the end of the year.

Comparative Return

The following table shows the number of samples of milk sent in from outside sources, taken during the past ten years, and the percentages infected:—

Year.						Samples Taken	Samples Infected	Percenta ge Infected
1938						2,386	208	8.7
1939	••••			*****		1,867	173	9.3
1940	••••					2,237	244	10.9
1941		•				2,377	189	8.0
1942			*****	••••	•••••	2,408	182	7.5
1943						2,456	146	5.9
1944						2,434	138	5.7
1945	••••		••••			2,396	122	5.1
1946		****				2,232	128	5.7
1947	••••					1,659	84	5.1
		Av	ERAGE	FOR PI	ERIOD			7.2

It will be seen from these figures that since 1938 the position has improved, the average percentage of infected milks for the past ten years being 7.2% and down to 5% for 1947. In a large measure this improvement can be attributed to dairy farmers, owing to food rationing difficulties, disposing of old and unprofitable cows for slaughter.

This is also revealed in the cattle slaughtered at the public abattoir. The percentage of the total number of cattle killed during 1947, found to be affected with tuberculosis was 33.4%, whereas the corresponding percentage for the year 1938 was 24.1%. This 9.3% increase is due to a greater percentage of low grade cattle received for slaughter than formerly.

Tuberculin Testing of Herds

The following return gives the number of animals tested during the year:—

	Tested	Passed	Failed	Commencement of Testing
1	 151	151		3rd October, 1908
2	 81	81		3rd October, 1908
3	 65	65	_	1st January, 1934

Inspection of Meat and Other Foods.

Under the Livestock (Restriction on Slaughtering) Order, 1940, the slaughtering of cattle, sheep and a certain number of pigs, carried out in Birmingham is concentrated at the Public Abattoir. In addition to that centre there are twelve private slaughterhouses attached to bacon factories in the City for the slaughter of pigs. Prior to the Ministry of Food's control of slaughtering there were 83 private slaughterhouses in use.

For the purposes of the inspection of meat in the Public Abattoir and in the bacon factories, there are employed five Veterinary Meat Inspectors and three Food Inspectors. The food inspection in the shops and food stores in the City is carried out by eight District Inspectors. There is also one Inspector employed in the Wholesale Fruit, Vegetable and Fish Markets.

Under the present procedure, whereby the Ministry of Food take control of slaughtering, the local authority continue meat inspection and inspection of slaughtering, as carried out prior to the change.

CARCASES INSPECTED AND CONDEMNED

Bacon Factories	Pigs	22,982	%09	14 95	%5.0	8 1,233 5.4%	2.9%	2.9%	6.2%
	Pigs	5,167	5,167	39	4.4%	18 408 8·2%	12.6%	12.2%	11.4%
City Meat Market	Sheep and Lambs	111,174	20%	129 10,831	%8.6	111	%8.6	3.6%	1.1%
CITY ME	Calves	66,277	66,277	676 241	1.4%	72 31 0.2%	1.6%	1.4%	1.6%
	Cattle	43,600	43,600	112 400	1.2%	690 13,897 33·4%	34.6%	32.8%	32.9%
		Number killed	Number inspected	All diseases except Tuberculosis: Whole carcases condemned Carcases of which some part or organ was condemned	Ferentiage of the number killed anected with disease other than tuberculosis	Tuberculosis only: Whole carcases condemned Carcases of which some part or organ was condemned Percentage of number killed affected with tuberculosis	TOTAL DISEASED 1947	TOTAL DISEASED 1946	TOTAL DISEASED 1945

SHEEP: General shortage of livestock in country and shortage of feeding stuffs, and last winter's wastage due to severity of weather and to flooding, account for the rise in percentage of disease to 9.8. The rise in percentage is mostly due to an increase of parasitic disease in livers.

Inspection of Meat, Fish and Other Foods at Corporation Hospitals, Institutions, Birmingham Restaurants, etc.

The premises visited	includ	e:—			
Institutions, etc				 	 36
School Meal Centres			••••	 	 97
Birmingham Restaurants		••••		 	 41
					174

1,853 visits of inspection were made during the year to the above premises. In cases where food supplies and storage conditions were found to be unsatisfactory at school meal centres, reports were sent to the School Meals Section, Civic Centre, and reports relating to food inspected at Birmingham Restaurants were sent to the Administrative Officer, Birmingham Restaurants Department, Civic Centre.

Shellfish

During the year, 44 samples of mussels and 1 sample of oysters were taken for bacteriological examination. Of these, all proved satisfactory except 8 samples of mussels, as follows:—

One sample from an island off Argyllshire was found on arrival to be unfit for sale owing to the time taken in transit. This source of supply has been discontinued voluntarily.

Three unsatisfactory samples came from layings in the Menai Straits, and arrangements have been made by which mussels from approved beds in the Straits are not to be sent into the City unless they have undergone purification at the Fisheries Experimental Station at Conway.

Four unsatisfactory trial samples were received from an Eire source which, it appeared on investigation, was already subject to a local prohibition order by reason of lack of purification facilities. It was arranged that mussels from this source should not be accepted for sale.

No infection was traced to consumption of contaminated shellfish during the year.

Registered Premises used for the Manufacture of Cooked and Potted Meats

Registration of premises which complied with the requirements of the Veterinary and Public Health Departments was carried out in 24 cases during 1947.

At the end of the year there were 264 food preparation premises on the register as follows:—

Sausages, cooked meat a	ind	pork pie	manuf	facturer	s	 	262
Jam manufacturers						 	2

264

4,212 visits of inspection were made.

Food and Drugs Act, Section 13

Provisions as to rooms where Food intended for Sale is prepared or stored.

To enable occupiers of shops to obtain paint, timber and other necessary material, for repairs and alterations, fourteen certificates have been issued, stating the requirements in each case.

The following retail food shops etc., were visited:

Beef and pork	butch	ers	 	 	1,026
Grocers			 	 	1,534
Greengrocers	٠		 	 	1,272
Hucksters			 	 	4,312
Fish Friers			 	 	425
Fishmongers			 	 	767
Horseflesh			 *****	 	2
	Tota	L	 	 	9,338

Visits of inspection were paid by inspectors as follows:—

Slaughterhouses (Bacon Fac	ctories)		 	 	1,050
Food preparation premises			 	 	4,212
Fish friers			 	 	2,146
Beef and pork butchers			 	 	19,593
Grocers			 	 	5,280
Greengrocers and fishmonge		 	 	14,965	
Hucksters			 	 	570
Ham and bacon curers		 	 	1,042	
Street hawkers			 	 	17,275
Horseflesh			 	 	11
Cold stores			 	 	17,602
Other requests			 	 	2,831
Institutions, schools, etc.			 	 ****	1,853
, , , , , , , , , , , , , , , , , , , ,					
					88,430

SECTION F

PREVALENCE OF, AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

GENERAL

The mortality figures for 1947 are set out below and compared with the decennial (1937-1946) averages in the statement following:

				Number			Yearly
Disea	ase			of			average No.
				deaths			of deaths
				1947			1937—1946
Enteric fever			 				2
Smallpox			 	_			
Measles	••••		 	24	••		22
Scarlet fever			 ••••	2	••••		3
Whooping cough	ı		 ••••	31			54
Diphtheria			 	3			48
Pulmonary tube	rculosis		 	691	••••	*****	726
Other forms of t	uberculos	sis	 	57			78
Influenza	••••	••••	 	89			182
Cerebro-spinal fe	ver		 ••••	10		••••	30
Poliomyelitis			 	11			2
-							

The prevalence of the notifiable diseases is shown in the next table:

•						Correcte Number			Yearly Average No.
	Disea	se				of			of corrected
						Cases		4	notifications
						1947]	1937—1946
Enteric fever		••••	••••		*****	9			30
Smallpox	••••	•••••		••••		1			_
Scarlet fever	••••	****				1,407			1,873
Diphtheria						223			924
Erysipelas						286			419
Puerperal py	rexia		••••			249			342
Ophthalmia	neonat	orum	••••			818			999
Pulmonary t	ubercu	losis		••••		1,223			1,035
Other forms	of tube	rculo	sis	••••		184	••••		165
Acute primar	ry or in	ıfluen	zal pne	umonia		1,259		••••	1,848
Cerebro-spina	al fever	•		••••		100			128
Acute poliom	yelitis			••••		172			15
Polioencepha	litis					3			1
Encephalitis	letharg	gica				7			8
Malaria						15			7
Dysentery						68			127

The cases of cerebro-spinal fever were 27 more than those of the previous year (100 against 73), and the deaths rose from 5 to 10.

Diphtheria was less prevalent than during 1946, the intermediate type predominating, with a fall in case mortality from 2.8 per cent. in 1946 to 1.3 per cent. in 1947.

Notifications of pulmonary tuberculosis increased by 88, non-pulmonary cases increased by 19, compared with 1946.

The apparent prevalence of "ophthalmia neonatorum" is illusory; only a trivial proportion are due to gonococcal infection. The great majority represent merely a precautionary notification of even the slightest condition capable of coming within the elastic definition of ophthalmia of the newly-born.

Enteric Fever

There were 17 cases notified as enteric fever, and of these 8 proved negative.

Undulant Fever

Only one case of undulant fever came to the notice of the Department during the year.

Glandular Fever

No cases of this disease came to the notice of the Department during the year 1947.

Smallpox

There was one case of smallpox in the City during the year, in the person of a young man who came into contact with cases of smallpox in a neighbouring area. He had been vaccinated in infancy, and was re-vaccinated—though to all appearance unsuccessfully—on the day of contact. He developed a mild attack of smallpox with prodromal symptoms on the 8th and eruption, scanty in extent, on the 12th day.

Vaccination

Following are tabulated statistics relating to this work for the current year, together with similar figures relating to each year since 1938.

	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938
Conscientious objectors										
per cent, of total births	17 ⋅3	18.9	19.6	20.3	18.9	21.2	22.6	27.5	31.2	31.8
Percentage of survivors										
Successful vaccinations	64.0	66.3	67 ·0	66.2	65.2	59.9	51.2	49.9	52.9	52.6
Insusceptible	0.5	0.5	0.5	0.6	0.9	0.6	0.8	0.4	0.5	0.6
Postponed by										
medical certificate	0.2	0.3	0.2	0.3	0.3	0.4	0.4	0.6	0.4	0.3
Removed	5.4	4.6	4.4	3.8	$4 \cdot 0$	$4 \cdot 4$	5.3	$4 \cdot 3$	3.9	3.9
Lost sight of	1.8	2.1	1.8	1.9	2.9	3.8	$7 \cdot 4$	5.0	3.5	$3 \cdot 2$
Still under notice	10.1	6.4	5.7	6.0	6.8	8.5	10.9	10.9	6.1	5.9

Measles

During the year 659 cases with a notified diagnosis of measles were admitted to Little Bromwich Hospital for treatment, and the total number of deaths was 24.

During the year 165 ampoules of measles immune serum were supplied to general practitioners and hospitals in the City. The 64 ampoules supplied to general practitioners were for prevention in 13 cases, and for

attenuation in 51 cases, and the majority of the 101 ampoules supplied to institutions were for the purpose of preventing an attack of measles in a child already in hospital suffering from some other disease.

Scarlet Fever

The number of cases notified was 40 less than in 1946; and there were two deaths from this disease.

As in previous years, cases were treated in hospital where home conditions made this advisable; otherwise they were treated at home.

The report on cases treated at the Infectious Diseases Hospital will be found on page 131.

Whooping Cough

During the year 467 cases with a notified diagnosis of whooping cough were admitted to the Infectious Diseases Hospital, and the total number of deaths from this disease was 31.

Where appropriate the services of a district nurse are supplied under an arrangement made with the District Nursing Association.

Diphtheria

The total number of cases notified was again markedly lower than in the previous year, and the cases confirmed in diagnosis also showed a considerable reduction, as did the case mortality:—

DIPHTHERIA CASE MORTALITY Case Me	Mortality .
-----------------------------------	-------------

							per cent.
1901-10	(av	erage)			 *****		14.1
1911-20		,,			 ••••		13.6
1921-30		,,			 		5.8
1931-40		,,			 		6.5
1936					 		5.5
1937					 ****		5.9
1938					 		6.5
1939					 		7.3
1940					 		6.0
1941					 		6.0
1942					 		4.2
1943					 	*****	3.7
1944				*****	 ****		2.7
1945			****	*****	 		4.0
1946					 	*****	2.8
1947					 		1.3

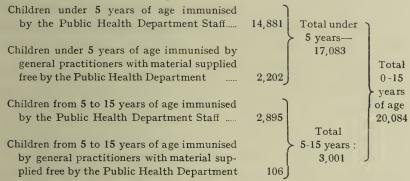
A report on the cases treated at the Infectious Diseases Hospital will be found on page 129.

Diphtheria Anti-toxin

Diphtheria anti-toxin is distributed free of charge to medical practitioners for the treatment of their patients, and can be obtained from the Public Health Department, the Bacteriological Laboratory, and eighteen police stations.

Immunisation against Diphtheria

The total number of children who received a full course of A.P.T. through the Public Health Department in 1947 was 20,084.



In addition 61 adolescents and adults were inoculated with T.A.F., mostly nursery staff, but including a few adults who were going to Europe or America.

14,546 supplementary doses of A.P.T., including 258 by general practitioners were given to children previously inoculated. Most of this work was carried out in the schools, the age grouping being as follows:—

Under 5 years of age						 	2,540
5-10 years of age						 	11,514
10—15 years of age						 	445
15 years of age and u	pwards	(mainl	y nur	sery sta	aff)		47

This supplementary dose is offered for children of all ages if the parents desire it, although the Department is concentrating on the children from 4 to 7 years of age. The major part of this work is still carried out in the Infant Departments of the schools, but the number of children of four to five years of age brought to Centres is steadily increasing.

Routine visits to child welfare centres, nurseries, nursery schools, primary schools and institutions were made and material supplied free of charge to general practitioners on request.

A table prepared annually of the percentage of immunised children from 8 months to 5 years of age in each health visiting district shows four centres with 80% to 90% immunised, fourteen centres with 70% to 80%, nine centres with 60% to 70%, and four centres with 50% to 60%, giving an immunisation total of 71·1% of the visited children. These figures are corrected for migrations and deaths and to a large extent for children coming into the City, as the immunisation history of such children is checked by enquiry from the district from which they have come; but they do not cover all the pre-school children, since some are not visited, and some are in institutions.

It is estimated that 73.8% of the pre-school children have been inoculated, and some 95.2% of the children between 5 and 15 years of age. It is not possible to correct this latter group to any extent for migrations and deaths. These losses are, however, in all probability broadly balanced

by the children coming into the City who have already been immunised elsewhere.

The estimated percentage of immunised children 0-15 years of age is 82.7%.

It is the practice in Birmingham for each health visitor to be responsible for obtaining consents for immunisation on her own district, helped by special letters sent to the parents from the central office and by leaflets, talks, etc., at the Centres.

A regular immunisation session at fortnightly intervals at all Child Welfare Centres (except five small ones where the interval is four weeks), makes it easy for mothers to attend at a time and place convenient for themselves. They can attend with or without appointment and may, if they wish, bring children of school age for primary or supplementary treatment although, with the exception of newcomers to the City, there is little need for this, as the schools are visited at least once a year and nursery schools and classes as required.

There were 84 cases of diphtheria in inoculated children, the majority of them extremely mild; three received their inoculations outside Birmingham.

There were only three deaths registered as due to diphtheria in the year. Two of them were Birmingham children whose parents had persistently refused to have them immunised; the third was a child of fourteen months who had had a single injection of A.P.T. at the age of nine months. This child was sent to a hospital other than the infectious diseases hospital, on account of severe laryngitis, and died shortly after admission. There seems to be no satisfactory evidence that the case was one of laryngeal diphtheria as no membrane was present and the post mortem showed only fibrinous exudate on the false vocal chords. A profuse growth of staphylococci was cultured, but no diphtheria bacilli either before or after death.

If this death were excluded as being improbably one of diphtheria, 1947 would rank as the first year in the history of the city in which no pre-school child died from diphtheria.

The year 1947 represents the coming of age of the diphtheria prevention scheme; for while staff immunisation at Little Bromwich Hospital began in 1922, Schick testing and immunisation at various institutions in 1925, open clinics in the City were not started until April, 1926.

It was realised that a high proportion of the children particularly in the pre-school group must be immunised before a general fall in diphtheria could be expected. Up to the time that the Ministry of Health started the national publicity campaign for immunisation in 1940-41, some 50% of the Birmingham children had been immunised, the majority of them in the school age group.

Since then the proportions immunised in pre-school and school groups have risen steadily, and there has been, coincident with this a corresponding fall in the cases of deaths from diphtheria. This is shown in the two following tables.

TABLE 1.

ESTIMATED PERCENTAGE OF CHILD POPULATION IMMUNISED, IN AGE GROUPS.

Year	0—5 years	5—15 years	0—15 years
1000	00.0	45.0	41.0
1938	33.3	45.9	41.9
1939	39.7	50.1	46.7
1940	44.4	53.6	50.7
1941	60.0	60.7	60.4
1942	64.9	72.7	70.0
1943	69.3	80.0	76.2
1944	75.5	85.8	82.2
1945	72.6	87.1	81.7
1946	69.2	91.1	82.5
1947	68.4	92.6	82.7

TABLE 2.

Diphtheria Cases and Deaths

	Under	5 years	5—10	years	10—15	s years	Total under 15 years		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	
1926	464	47	677	52	274	12	1,415	111	
1927	366	20	561	30	237	7	1,164	57	
1928	346	26	640	32	257	6	1,243	64	
1929	402	36	699	33	229	8	1,330	77	
1930	423	38	660	28	294	7	1,377	73	
1931	329	22	430	27	179	9	938	58	
1932	179	15	219	15	87	2	485	32	
1933	110	14	145	11	84	4	339	29	
1934	303	33	415	38	143	8	861	79	
1935	312	26	472	44	180	10	964	80	
1936	312	27	542	34	124	1	978	62	
1937	352	32	583	31	207	13	1,142	76	
1938	251	23	416	29	203	9	870	61	
1939	179	19	209	18	107	7	495	44	
1940	218	25	258	17	165	8	641	50	
1941	346	48	438	24	227	5	1,011	77	
1942	245	16	383	24	218	6	846	46	
1943	203	19	330	11	236	4	769	34	
1944	151	11	193	3	144	2	488	16	
1945	91	6	166	4	81	3	338	13	
1946	74	5	95	2	79	1	248	8	
1947	79	1	56	1	35	1	170	3	
								1	

DIPHTHERIA IN IMMUNISED AND NON-IMMUNISED CHILDREN

POPULATION AGED 0-15 YEARS, 1938-1947

1947	206,430	3.3	42,910	17.3%	20	6.8
1946	199,746 82·5%	5.3	42,244	17.5%	29.1	9.4
1945	190,993	6.6	42,687	18·3%	49.4	14.4
1944	180,750 82·2%	9.6	38,890	17.8%	80.4	22.2 0.68
1943	168,708 76·2%	11.3	52,412	23.8%	110.2	34.7
1942	150,079	12 0.07	64,900	30.0%	102 6.9	39
1941	132,263 60.4%	14	77.800	39.6%	112	48
1940	113,198	5.3	008'96	49.3%	60	30
1939	107,000	3.6	122,693	53.3%	37	21
1938	96,446 41.9%	40	136,949	28.1%	61	37
	IMMUNISED CHILDREN: Total 0—15 years =-per cent. of child pop'n Diphtheria per 10,000 immunised children 0—15	years Case Rate Death Rate	Non-Immunised Children: Total 0—15 years	eper cent., or cand popula- tion Diphtheria per 10,000 non-	Immunised children U—15 years: CASE RATE DEATH RATE	Total Diphtheria per 10,000 children 0—15 years: Case Rate

* The figures are to be regarded as only approximate, in view of the difficulties of assessing the child population in these years.

The present relative infrequency of diphtheria seems unfortunately to be producing some apathy on the part of many parents; and this may become a formidable difficulty in keeping up the level of immunised children. It is to be noted for instance, that during 1947 there was a fall to the extent of $1\cdot2\%$ in the proportion of immunised children aged eight months to five years of age.

Intensive and extensive education of parents continues therefore to be essential to ensure the maintenance of immunisation of the child population at a satisfactory level.

Dysentery

Ninety-nine cases were notified during the year, and one revision of diagnosis from Poliomyelitis to dysentery gives a total of 100, and one revision, but on investigation 32 of these proved not to be dysentery, making a net total of 68 clinical cases.

Malaria

Sixteen cases of malaria were reported during the year, all contracted abroad, and including some Service cases.

Food Poisoning

During the year under review 55 cases of food poisoning were notified to the Department. The majority were of a trivial nature not calling for any specific action by the Public Health Department.

Acute Anterior Poliomyelitis

The year 1947 was marked by a sharp rise in the number of cases of poliomyelitis, the City being involved in the widespread epidemic experienced throughout the whole country. The increase in prevalence may be measured by the fact that the average number of confirmed cases for the years 1944/45/46 was 18, while in 1947 the number rose to 166.

In all 323 notifications were received, but of these 157 were found not to be cases of poliomyelitis, while the remaining 166 cases were confirmed.

From the information available the cases occurring in the earlier stages of the epidemic appeared to be the more serious; in that of the cases occurring by the end of July, 37 cases were confirmed, 7 of which proved fatal. Over the year as a whole, with its total of 166 confirmed cases, there were 14 deaths, giving a case mortality of 8.4%.

Of the total number of confirmed cases 58 were mild, showing no paralysis, 47 were notified with paralysis of only one site, while 57 were notified with multiple paralyses. Four cases were diagnosed as polio-encephalitis, two of these being fatal.

The distribution of the disease was general throughout the City. In only two instances was there more than 1 case in a household. In one of these, two cases in the household were confirmed, and both were of non-paralytic type. In the other instance, that of a husband and wife, the wife was notified first and found to have non-paralytic poliomyelitis, while the husband, notified 5 days later, died three days after admission to hospital. Their two children, aged 1 and 3 years, both escaped infection.

The following is a summary of the incidence from which it will be seen that while children and adolescents constituted the largest groups affected, there was a substantial incidence in young adults in both sexes; while among males the fatal cases were confined to the group of young adults.

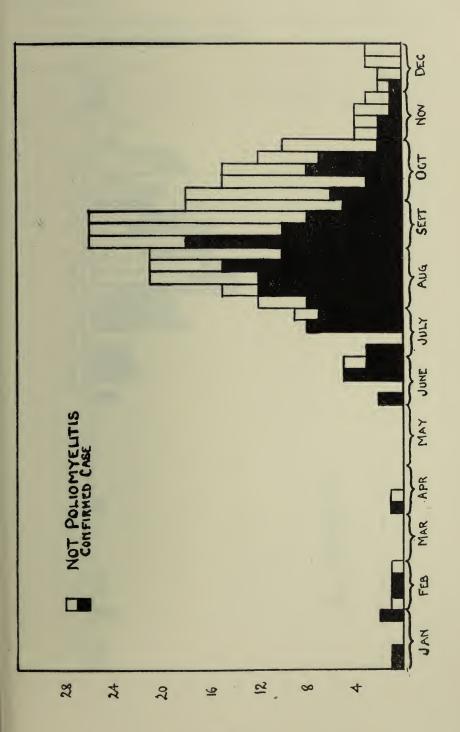
ACUTE POLIOMYELITIS. AGE INCIDENCE OF CASES AND OF DEATHS

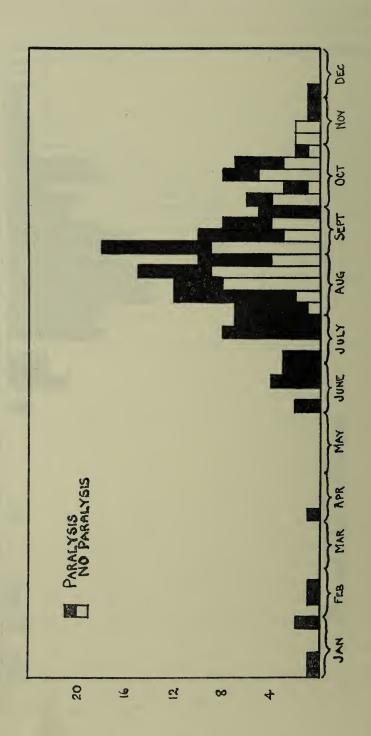
MALES

0-5	5–10	10–15	15–20	20–25	25–30	30–35	35–40	40–45	45–50
33	12	15	6	4	8	1	3	2	2
				2 deaths	5 deaths				

FEMALES

0-5	5–10	10–15	15-20	20–25	25–30	30–35	35–40	40–45	45–50
21	20	6	6	9	10	1	6	1	-
1 death	3 deaths	1 death	1 death		1 death				





Polioencephalitis

Five cases of this disease were notified during the year, but only three of these were true cases of which two died.

Encephalitis Lethargica

During the year 12 cases were notified as suffering from encephalitis lethargica, of which only seven proved to be true cases. There were five deaths from this disease during the year.

Cerebro-Spinal Fever

There were 219 cases notified as cerebro-spinal fever during the year. In 119 cases the diagnosis was afterwards revised, leaving 100 clinical cases of this disease. Of the 100 actual cases, 10 succumbed to the attack, giving a case mortality rate of 10.0%.

Age Distribution										
Under 1 year			*****				21			
1 and 2 year	rs						13			
3 ,, 4 ,,						*****	11			
5 and under	10 year	rs					14			
10 ,, 1	15 ,,						11 .			
15 ,, 2	20 ,,		+				11			
20 ,, 2	25 ,,						3			
25 ,, 3	35 ,,					••••	7			
35 ,, 4	15 ,,						4			
45 years upw	ards						5			

REPORT ON THE CITY INFECTIOUS DISEASES HOSPITALS FOR THE YEAR 1947

By Dr. J. McGarrity, Medical Superintendent

STATISTICS

Little Bromwich Hospital

The total admission of all cases for the year 1947 was 3,814

	(0	a) DI	PHTE	IERIA				Uncorrected
								for diagnosis
In hospital or	n 31st	Decen	ber, 1	946				63
Admitted								634
Discharged								633
Died				••••				11
Remaining or	n the 3	31st D	ecembe	er, 1947				53
	(7	b) SC	ARLE	T FEV	ER			
In hospital or	n 31st	Decen	ber, 1	946				21
Admitted								366
Discharged								350
Died								1
Remaining or	n the 3	1st De	ecembe	r, 1947				36
		-\ %/TI	CCET	T A NITEO	TIC			
	•	′		LANEO	03			
In hospital or	n 31st	Decen	iber, 1	946	••••	••••	••••	321
Admitted				••••				2,814
Discharged			••••		••••	••••		2,780
Died		••••						165
Remaining or	n the 3	31st D	ecembe	er, 1947	••••	••••		190
(d) M	ISCEL	LANI	eous	(Uncorr	ected f	or diag	nosis)	
Chickenpox								100
Dysentery								76
Encephalitis								7
Enteric fever			••••					18
Erysipelas								83
Gastro-enteri				••••				352
Measles				••••				659
Meningitis								204
Miscellaneous								331
Mumps								35
Pemphigus	••••							17
Pneumonia						••••		27
Poliomyelitis								282
Puerperal fev								47
Rubella								95
Smallpox								3
Vincent's ang		•••••		••••				10
Whooping co			•••••	•••••			•••••	468
vinooping co	4511		*****		*****			
								2,814

Diphtheria

During the year 634 cases were admitted to the hospital with the diagnosis of diphtheria. The diagnosis required revision in 444 cases. There was one case notified for observation which proved to be suffering from diphtheria, making the total number of cases of diphtheria treated in the wards during the year 191.

The revised diagnoses of 444 patients notified as diphtheria were as follows:—

Tonsillitis				 	****		277
Laryngitis				 			51
Scarlet fever			•••••	 			26
Quinsy	••••	••••	••••	 ••••			25
Vincent's an	gina			 			17
Measles		••••	••••	 			12
Bronchitis				 1	••••		5
Retropharyn	geal at	scess		 		····	3
Rhinitis				 			3
Miscellaneous	S			 			25
							444

The miscellaneous group consists of coryza (2), septic adenitis (2), broncho-pneumonia (2), secondary syphilis (2), pulmonary tuberculosis (2), no evidence of any disease (2), tonsillitis and carrier (1), whooping cough (1), Ludwig's angina (1), leukæmia (1), gastro-enteritis (1), mumps (1), stomatitis (1), lobar pneumonia (1), post-tonsillectomy (1), cardiac failure and bronchitis (1), otorrhæa (1), uræmia (1), poliomyelitis (1).

There were nine deaths among the revised group.

Table showing type	es of	diphth	neria :-	_				
Faucial				•		••••		154
Faucial and nasal							••••	19
Nasal				•···•				11
Laryngeal								5
Faucial and laryngeal			••••		•	****	••••	1
Faucial, nasal and lary	ngeal	*****				****	••••	1
								191

There were two deaths from diphtheria. One occurred within 48 hours of admission on the sixth day of disease, the second died from diaphragmatic paralysis in the fifth week. In neither case was there previous immunisation.

Serum dosage administered:-

0-2,000 units					 41 very mild cases
4,000—8,000 units		4			 109 mild cases
9,000 or more units	(intra	muscul	ar)		 26 mod. severe cases
20,000 or more (intr	amuscu	ılar and	l intrav	enous)	 13 severe cases
No serum					 2
					191

in

Serum urtica	aria v	vas ot	serve	d in e	leven (cases	and of	ne had	arthri
addition.									
Types of dip	hther	ia org	anism	s were	obtair	ned in	89 ca	ses as :	follow:
Gravis				••••					35
Intermedius				••••					47
Mitis									7
In 99 cases a	hist	ory of	immı	ınisati	on was	confi	rmed.		
Post-diphthe	eritic	paral	vsis	occurr	ed as	follo	ws :		
1		r	J						
Palatal									26
_		-							26 1
Palatal				•					
Palatal Ocular									1
Palatal Ocular Pharyngeal			 						1 2
Palatal Ocular Pharyngeal Cervical			 						1 2
Palatal Ocular Pharyngeal Cervical Upper limb			 						1 2 6 1
Palatal Ocular Pharyngeal Cervical Upper limb Diaphragmatic			 						1 2 6 1

The paralysis noted above occurred in 27 patients, one of which died. This gives a paralysis rate of 14.1%.

Laryngeal Diphtheria

In no case of diphtheria involving the larynx was it necessary to interfere for the relief of obstruction.

Two cases of glottic ædema associated with streptococcal infection required intubation for relief of obstruction and one case with a parapharyngeal abscess required tracheotomy. All three recovered.

Table showing age and sex of diphtheria patients:—

Age Grou	p 0–5	5–10	10–15	15–25	25-45	Over 45	Totals
Recovered:							
Males	40	24	7 (1 died)	7	4	1	83
Females	29	27 (1 died)	24	20	6	2	108
Totals	6 9	51	31	27	10	3	191

Hospital mortality 1.05%.

Scarlet Fever

During the year 366 cases were admitted with a notified diagnosis of scarlet fever; of these 45 required revision of diagnosis:—

Dermatitis					 	 	1
Measles					 .,	 	7
Tonsillitis					 	 	6
Poliomyelitis a	and ton	sillitis			 	 	1
Infective hepa	titis				 	 	1
Pharyngitis		•			 	 	1
Erythema of u	nknow	n origi	n		 	 	9
Acute coryza					 	 	1
Rubella					 	 	7
Burns					 	 	1
Lobar pneumo	nia				 	 	3
Meningismus					 	 	1
Chickenpox					 	 	2
Sulpha drug ra	sh				 	 	1
Appendicitis					 	 	1
No evidence of				1	 	 	2

45

There were actually 372 true cases of scarlet fever treated in the wards during the year, including the following notified as:—

Tonsillitis and	append	dicitis		 			••••	1
Tonsillitis				 	1			3
Sinusitis				 				1
Streptococcal s	epticae	emia		 	••••			1
Erysipelas			•	 				1
Chickenpox				 		••••		1
Poliomyelitis	••••			 				1
Diphtheria		*****	••••	 			****	26
Measles			*****	 				9
Rubella	••••		••••	••••			••••	6
Gastro-enteritis	5	••••		 				1

Concurrent infections occurred in nine cases:-

Scarlet fever and measles	••••	 	 	1
Scarlet fever and chickenpox		 	 ··· ··	6
Scarlet fever and whooping cough		 	 	1
Scarlet fever and puerperal sepsis		 	 	1

The type of scarlet fever was very mild; there was one septic case and one sub-toxic.

The principal complications were:—

Adenitis	 	 	 		 21
Dysentery	 	 	 		1
Otitis media	 	 	 		19
Rhinitis	 	 			8
Abscess	 	 	 		 5
Carditis	 	 	 		 1
Mastoiditis	 	 	 		 6
Arthritis	 	 	 		2
Tonsillitis	 	 	 		4
Septic spots	 	 	 		9
Bronchitis	 	 	 		6
Dermatitis	 	 	 		1
Nephritis	 	 		*****	2
Rheumatism	 	 			1

Anti-streptococcal serum was used in 251 cases; serum and sulphonamide in 81 cases; serum and penicillin in 21 cases; serum, penicillin and sulphonamide in seven cases; sulphonamide in six cases; and no specific treatment in six cases. Serum rashes occurred in 25 cases.

86

There was one death from scarlet fever, complicated by pneumonia and lung abscess.

Table showing age and sex of scarlet fever cases:—

Age Group	0-5	5-10	10–15	15-25	25–45	Over 45	Totals.
Recovered:							
Males	79	5 0	26	16	4	1	176
Females	64	64	30	21 (1 died	15	2	196
Totals	143	114	56	37	19	3	372

Hospital Mortality 0.27%.

Measles

Co

In all 659 patients were admitted with a notified diagnosis of measles, and of these 89 required revision of diagnosis as follow:—

Scarlet Fever						9
						_
Rubella						30
Erythema of un	nknown	origin				10
Sulphathiazole	eruptio	n				2
Meningitis						2
Whooping coug	h					2
No evidence of	disease					7
Mumps						1
Sudamina						1
Dysentery						2
Gastro-enteritis	3					1
Mastoiditis						2
Otitis media			 			1
Laryngitis						2
Bronchitis						8
Broncho-pneun	nonia				(died)	1
Blepharitis						1
Bronchiectasis						1
Impetigo						1
Coryza						4
Feeding misma	nageme	nt				1
					_	
						89
					_	

Besides the 570 measles notified correctly, an additional 51 cases of measles were treated, having been notified as follow:—

Scarlet fever	*				7
Meningitis					2
Miscellaneous					11
Gastro-enteritis					2
Pneumonia					3
Diphtheria					12
Whooping coug	h				6
Rubella					8
					-
					51

The total number of true measles was, therefore, 621.

Concurrent infections occurred as follow:-

oncurrent	measles	and	chickenpox			4
,,	,,	,,	dysentery			17
"	,,	,,	whooping cough			7
,,	,,	,,	tuberculosis			2
,,	,,	,,	rubella			3
,,	,,	,,	scarlet fever			1
	,,					

The principal complications were as follow:—

•	•	•			Pac	overed	Died
Broncho-pne	umonia	on admis	ecion			68	Diea 7
•		after adr			••••	12	′
Otitis media			111551011			27	
		dmission	••••		*****		
Convulsions			••••	•••••		11	
		••••	••••			1	
Laryngitis	•	••••	••••		••••	25	
Bronchitis			••••	••••		20	
Enteritis	••••	•···•				13	
Congenital he			•···•			1	
Serum reaction						1	
Sulphathiazo	le erupt	ion				1	
Stomatitis						4	
Blepharitis						2	
Dermatitis						13	
Appendicitis						5	
Nephritis						2	
Tonsillitis						16	
Rheumatism						3	
Sepsis						15	
Rhinitis						11	
Meningism						1	
Scalds, burns						4	
Bronchiectas		••••				1	
Tuberculosis						2	2
Encephalitis						1	_
Ziioopiiaiitis	••••	••	••••				
						260	9
							3

Ten deaths occurred among the measles cases, the causes of death being:—

Broncho-pneumonia			 	 6
Pneumonia and purulent tracheo-l	bronch	itis	 	 1
Tuberculosis			 	 2
Tracheitis and cardiac failure			 	 1
				10

Table showing age and sex of measles patients:—

Age Group:	0-1	1–2	2-3	3–4	4–5	5–10	10-20	Over 20	Totals
Recovered:									
Males	38	91	73	40	23	52	1	6	324
Females	25	. 77	66	37	26	38	9	9	287
Died:									
Males	1	2	1	1					5
Females	_	3	1	1			_		5
Totals	64	173	141	79	49	90	10	15	621

Hospital mortality, 1.6%

Whooping Cough

A total of 468 patients were admitted with a notified diagnosis of whooping cough, and of these 94 required revision thus:—

Bronchitis			 				48
Broncho-pneur	nonia		 				10 (2 died)
No evidence of	diseas	е	 	••••			14
Measles			 				6
Enteritis			 				4
Laryngitis	••••		 	****	****		2
Otitis media			 			*****	2
Miscellaneous			 				2
Chickenpox			 			••••	2
Pulmonary tub	perculos	sis	 				2
Rubella			 ****	••••	****	*****	1
Pneumococcal	empye	ma	 				1
				Tot	tal		94

Actually 384 cases of whooping cough were treated in the wards, including those notified as:—

Pneumonia						3
Flieumoma		*****				
Measles			 			3
Meningitis			 			3
Diphtheria			 			1
			-			10
			To	otal		10

Concurrent infections occurred as follow:—

Whoop	oing cou	igh ar	nd measles			16
,,	,,	,,	chickenpox			6
,,	,,	,,	scarlet fever			1
,,	,,	,,	otitis media			1
,,	,,	,,	dysentery			1
,,	,,	,,	rubella			1

The principal complications were as follow:-

			In patients who recovered		In patients who died
Broncho-pneun	nonia	 		62	10
Bronchitis				1	_
Gastro-enteritis	3	 	 	5	2
Convulsions				6	_
Otitis media				6	
Tuberculosis				1	1
Miscellaneous		 	 	14	
Spina bifida		 	 	_	1
Vaccinia		 	 	_	1
Measles				9	*
			••••		
				104	15
				104	15

Of those who recovered the complications in thirteen cases occurred after admission.

Amongst the whooping cough patients twenty-three deaths occurred:

Whooping cough and			broncho-pne	umoni	a	 	 16
,,	,,	,,	gastro-enteri	tis		 	 4
,,	,,	,,	tuberculosis				 1
,,	,,	,,	spina bifida			 	 1
,,	,,	,,	vaccinia			 	 1

23

Table showing age and sex of whooping cough patients:-

Age Grou	ip 0-1	1-2	2-3	3–4	4–5	5-10	Over 10	Totals
Recovered:								
Males	31	34	33	27	16	16		157
Females	56	46	46	24	14	17	1	204
Died:								
Males	11	1	1		_	-	_	13
Females	5	3	1	1		_	-	10
Totals	103	84	81	52	30	33	1	384

Mortality: 6.0%.

Cerebro-Spinal Meningitis

The total number of notified cases of meningitis admitted to the wards was 204, but of these 170 required revision of diagnosis:—

Influenzal mening	gitis				2
-Pneumococcal me	eningitis				3 (1 died)
Tuberculous men	ingitis				13 (all died)
Benign lymphocy	tic meningi	itis			3
Poliomyelitis					19
Meningitis (no or	ganism four	nd)			1
Tetanus					1 (died)
Common cold					6
Influenza					4
Constipation	.				7
Broncho-pneumo	nia				7
Lobar pneumonia	ι				12
Tonsillitis					16
No evidence of di	isease				12
Measles					2
Acute bronchitis					5 (1 died)
Acute nephritis					2 (1 died)
Erythema of unk	nown origin	ı			1
Cerebral thrombo	sis				4 (2 died)
Temporo sphenoi	dal abscess				1 (died)
Subarachnoid hae	emorrhage				4 (1 died)
Gastro-enteritis a	nd dysenter	ry			6
Otitis media					4 .
Whooping cough					2
Cervical adenitis					1
Streptococcal men	ningitis				3 (1 died)
Fibrositis of neck					1
Concussion					1
Meningismus					8
Laryngitis					1
Osteomyelitis					1
Post-epileptic star	te		11		3
Headache					1
Sinusitis					3
Tuberculoma					1
Pyrexia of unkno	wn origin				2
Petit mal					1
Hydrocephalus					2 (1 died)
Teething					1
Dermatitis					1
Dementia					1
Staphylococcal se	pticaemia				1
				-	

The actua	l numbe	er of	cases	treated	was	37,	which	included :
Notified as I	ooliomyeli	itis					••	1
Notified for	observati	on						2 (1 died)
The chief	complic	atio	ns wer	e:				
Paresis								2
Broncho-pne	eumonia							1
Otitis media								2
Deafness							•	1
Squint								1
								7
No. of c	leaths: 3				M	ortal	itv : 8.1	10/

Gastro-enteritis and Dysentery

The total number of cases treated was 394. There were 428 cases notified as gastro-enteritis and dysentery and of these 66 required revision of diagnosis.

Included in the total of 394 were the following revised to gastro-enteritis:—

Notified for observation						8 (2 died)
Notified as meningitis				٠		6 (2 died)
,, ,, whooping co	ugh					5 (1 died)
,, ,, enteric fever					•	4
,, ,, diphtheria						1 (died)
,, ,, pneumonia						1
,, ,, measles						1 (died)
					•	26
The following were r	evised t	o dyse	ntery	:—		
The following were r	revised t	o dyse	ntery 	:		1
· ·	revised t	o dyse 	ntery 	:		1 2
Notified for observation						
Notified for observation Notified as measles						
Notified for observation Notified as measles ,, ,, enteric fever						2
Notified for observation Notified as measles ,, ,, enteric fever						2

In the 66 cases in which no evidence of gastro-enteritis or dysentery could be found the following diagnoses were made:—

Anaemia haemolytica	,						1
Appendicitis				*****			3
Bronchitis							3
Constipation							2
Dermatitis							1
Feeding upset							5
Henoch's purpura							1
Intussusception							4
Measles							2
Meningitis							1
No evidence of any d	isease						19
Peptic ulcer							1
Pneumonia						••••	6
Pyelonephritis	••••						1
Pyloric stenosis					*****		2
Otitis media						••••	2
Rubella							1
Salpingitis							2
Senility							1
Typhoid							1
T.B. peritonitis							1
Tonsillitis							1
Thyrotoxicosis							1
Ulcerative colitis							1
Whooping cough							1
Carcinoma of large in	testine						2
							66
T1 ' ' 1	1.						
The principal con	mpiicai	tions	were :-				10
Otitis media							10
Broncho-pneumonia							7
Dermatitis							3
Abscesses							4
Bronchitis							4

Below is appended the principal sub-divisions into which dysentery fell according to the organism responsible. B.Morgani and B.Paracolon have been treated as one, as the pathogenic significance of these organisms is doubtful and their presence may possibly indicate some more toxic organism not actually isolated.

B. Morgani and B. Paracolon cov- ed Died tality	14.3%	36.4%	13.3%	1	I	1	1	74 11 14.9%
Morga F. Par Died	ıc	4	2	1	1	1	1	Ξ
B. B Recov- ered	35	111	15	2	2	2	7	74
. 2	12.5%	%0.09	1	-	ı	ı	1	%.5%
Salmonella Typhimurium v- Mor-	1	_	1	1	1	1	1	2
T ₃ Recov- ered	∞	2	4	1	2	1	7	24
Shigella Flexner cov- ed Died tality	1			ı	I	-	1	I
gella F Died	1	1	1	1	1	1	1	I
Shiy Recov- ered	1	1	1	1	1	1	-	7
Shigella Sonne ov- d Died tality	ı		1	1	1	1	ı	1
igella Died	1	1	I	1	1	1	1	
Sh Recov- ered	1	7	19	10	3	_	က	39
Gastro-enteritis ov. ed Died tality	28.7%	%8· *	5.3%	I	1	1	-	40 19.7%
stro-ent Died	25	13	7	1	1	1	- [40
Ga. Recov. ered	87	53	38	∞	11	7	23	203
·	Age Groups 0—6 months	6-12 months	1—2 years	2—3 years	3—5 years	5—10 years	10 years and over	Totals
	Ö	-9	1	2	3	5	10 3	

Miscellaneous Observations

There were 331 cases admitted to the wards for observation, the final diagnosis being:—

Gastro-enteritis	and d	ysente	ry			11
Scarlet fever			·			5
Tonsillitis						80 (1 died, congestive cardiac
						failure)
Babies accomp	anying	mothe	rs			51
Mothers accom	panyin	g babi	es			22
Diphtheria						1
Broncho-pneun	nonia					2
Poliomyelitis				·		2
Rubella						1
Measles						11
Puerperal cond	itions					8
Meningococcal	septica	emia				2 (1 died)
Tuberculosis						2 (1 died)
Appendicitis						3
Vincent's angin	.a					1
Whooping coug	h					1
Catarrhal jaund	lice					6
No evidence of	disease					10
Quinsy						45
Dermatitis						4
Influenza						3
Stomatitis						13
Bronchitis						4
Erythema nodo	sum					2
Cellulitis						2
Fibrositis						2
Constipation						2
Chickenpox						2
Mumps						1
Miscellaneous					••••	32
						331
					,	

Erysipelas

Of the 83 cases notified as erysipelas nine required revision of diagnosis as follow:—

Orbital bruising and conjunctivitis	 		1
Blepharitis and orbital cellulitis			1
Herpes			 3
Submandibular abscess			1
Toxic scarlet fever	 		1
Inflammation of foot			1
No evidence of disease	 		 1

The number of cases treated in the wards was 76. The site of the erysipelas was as follows:—

race							 58	
Limbs							 15	
Trunk							 3	
							76	
							-	
The principa	al com	plica	tions (occurre	ed as fe	ollow:		
Abscesses		_			1			1
	••••	••••		••••	•••••		 	
Blepharitis			•••••	••••	••••		 	1
Adenitis							 	3
Bronchitis							 	3
Cellulitis							 	1
Otitis media				!			 	4
Septicaemia							 	1
Sulphonamide	rash						 	1
Relapse:							 	1
Serum reaction							 	2

Of the total, 52 patients were treated with serum and sulphonamide, 2 with serum, 3 with serum and penicillin, 17 with serum, penicillin and sulphonamide, and 2 with sulphonamide.

Table showing age and sex of erysipelas patients:-

Age group	0–5	5–10	10–15	15–25	25-45	Over 45	Total
Recovered:							
Males	4	_	1	1	10	6	22
Females	4	_	2	_	15	30	51
Totals	8		3	1	25	36	73

There were three deaths in females over 45 years.

Hospital mortality 4.1%

Chickenpox

There were 100 cases notified as chickenpox of which 11 required revision of diagnosis:—

Septic spots	 	 		 	 3
Insect bites	 `	 		 	 1
Bronchitis	 	 		 	 1
Dermatitis	 	 		 	 4
Urticaria)	 	 1
Scarlet fever	 	 		 	 1

11

Actually 94 cases were treated, including one notified as measles: one notified as smallpox, two notified as whooping cough and one notified as scarlet fever.

Concurrent infections occurred as follow:—

Dysentery			 			1
Measles			 			3
Pneumococcal	menin	gitis	 			1
Scarlet fever			 			1
						6

There were no deaths.

Enteric Fever

There were eighteen cases notified as enteric fever and of these eleven required revision of diagnosis as follow:—

							1
							4
							1
						*****	1
							1
ı	:					•	1
unkn	own ori	gin					1
Э							1
							11
֡	 unkn	unknown ori	unknown origin				

The actual number of cases treated was eight, including one notified as gastro-enteritis.

The organisms found were all B.typhosus.

The treatment given for four of the eight cases was sulphonamide and penicillin, for one case sulphonamide and in three cases no specific treatment was necessary. There were no deaths.

Mumps

Altogether there were thirty-five notified cases of mumps of which seven required revision:—

						_
Eclampsia .			 		*****	1
Tonsillitis .		****	 	 ••••		1
Cervical adenitis			 	 		1
Septic parotitis			 	 		1
Infected insect b	ites	••••	 	 		1
Bilateral subman	ndibular a	bscesses				1
No evidence of d	lisease		 	 		1

,

Actually there were the	irty t	rue cas	ses of	mump	s incl	uding	:
Notified as diphtheria							1
,, ,, poliomyelitis							1

There were no deaths.

Pemphigus

There were seventeen cases notified as suffering from pemphigus of which seven required revision of diagnosis:—

Furuncular lesions					 	 1
Dermatitis					 	 1
Gastro-enteritis					 	 1
Excoriation of buttocks and abdomen					 	 1
Septic skin lesions					 	 2
Septic skin lesions ar	nd right	t otitis	media		 	 1
						7

There were ten true cases of pemphigus. There were no deaths.

Poliomyelitis

As a result of the epidemic of infantile paralysis 282 cases were admitted to the hospital with a diagnosis of poliomyelitis or suspected poliomyelitis. Of these 155 required revision of diagnosis. There were in addition 22 cases admitted with a notification of some other disease (nineteen meningitis), which proved to be cases of polioymelitis. This makes 149 cases of true poliomyelitis treated in the wards. 122 of these were admitted during the ten-week period 15th July to the 30th September.

The corrected diagnosis of the 155 cases which required revision were as follow:—

No evidence of	f any d	lisease	 			55
Tonsillitis			 	 		19
Rheumatic fev	er		 	 	 	8
Lobar pneumo	nia		 	 	 	7
Bronchitis			 	 	 	7
T.B. meningiti	s		 	 	 	6
Pyrexia of unk	nown	origin	 	 	 	5
Osteomyelitis			 	 	 	4
Meningismus			 	 	 	3
Injuries	•		 	 	 	3
Pharyngitis			 			3
Abscesses		•	 			3
Miscellaneous			 	 	 •	32

The miscellaneous group consists of two cases each of cellulitis, sonne dysentery, erysipelas, coryza, subarachnoid hæmorrhage and cerebral hæmorrhage, and one case each of hyperpiesis, mumps, meningococcal meningitis, meningioma, pneumococcal meningitis, influenza, fibrositis, adenitis, schizophrenia, otitis media, dyspepsia, pneumonitis, psychoneurosis, subacute bacterial endocarditis, subacute appendicitis, sciatica, scurvy and rickets, neuro-syphilis, scarlet fever and rubella.

Type of disease:—

Very mi	ld (no	n-para	lytic)				54
Mild						 	28
Moderat	:e					 	30
Severe						 	25
Deaths						 	12
							149

The cases which suffered from paralysis of one limb only are classified as mild, those suffering from more than one paralysis in which the ultimate prognosis seemed favourable are classified as moderate. The severe group was composed of cases whose final disability is expected to be of great incapacity.

The following paralyses were recorded:-

				In cases	which
Site			(a)	Survived	(b) Died
Lower limb or	limbs			70	6
Upper limb or	limbs			37	8
Back				27	3
Neck				6	3
Face				5	
Eyes				3	1
Abdomen				5	
Palate				3	_
Pharynx				1	1
Intercostal				2	6
Diaphragm				contrast.	8
. 0					
				159	36

The 159 paralyses occurred in 83 paralytic cases which survived and the 36 in the twelve cases which died.

Sixty-six cases had some residual paralysis on discharge home or on transfer to an orthopædic hospital. Thirty-one cases were transferred to an orthopædic hospital, the remainder were to attend an orthopædic out-patients' department for further treatment and surveillance.

Table showing mortality in poliomyelitis according to day of disease on admission to hospital.

Days	of Dis	sease		Total	Died	Mortality
First				 3		
Second				 10	4-	
Third				 25	3	12.0%
Fourth				 24	3	12.5%
Fifth			••	 16	1	6.2%
Sixth				 17	4	23.5%
Seventh				 10		
Eighth				 17		
Ninth				 7	1	14.3%
Tenth a	nd ov	er		 20		
				149	12	8.1%

The cause of death in eight cases was due to respiratory paralysis. All these cases were treated in the iron lung for periods ranging from a few hours to $4\frac{1}{2}$ months. Three deaths were attributed to polio-encephalitis and one to poliomyelitis associated with broncho-pneumonia.

Table showing age and sex of poliomyelitis cases:—

Age group	1—5	5—10	10—15	15—20	20-30	30—40	Over 40	Total
Recovered :	:							
Males	19	13	19	6	5	4	3	69
Females	20	12	8	7	15	4	2	68
Died:								
Males					5	1		6
Females	1	1	1		1	2		6
	40	26	28	13	26	11	5	149

Hospitality mortality—8.1%

Puerperal Pyrexia

There were 47 cases of puerperal pyrexia notified of which eight required revision as follow:—

Influenza			 	 	 2
Miliary tuberculosis			 	 	 1
Pneumonia			 	 	 1
Debility			 	 	 1
Cardiac failure and m	itral s	tenosis	 	 	 1
No evidence of diseas	e	••••	 ••••	 	 2

.

The cause fo	r the	pyrexi	a in tl	he rem	aining	cases	was	as follo	ws:
Subinvolution									19
Pneumonia				*****					3
Septic scarlet fe	ever								1
Mastitis			*****						2
Pyelitis								****	2
Septic perineur	n							*****	4
Fissured nipple	s								2
Breast abscess									2
Abortion									1
Thrombo-phleb	itis an	d pulm	onary	embolu	s				3
									39
									-

In addition to the above 39 cases there were nine cases admitted for observation, making a total number of 48 cases treated.

There was one death in the case of cardiac failure and mitral stenosis.

Pneumonia

There were 27 cases notified as pneumonia, of which 11 required revising as follow:—

Bronchiectasis 1 1 2 2 2 3 3 3 3 3 4 5 4 5 4 5 4 5 5 5											
Measles 3 Bronchitis 4 Pulmonary tuberculosis 1 11 The actual number of cases treated was 70, including:— Notified as scarlet fever 3 """>""""""""""""""""""""""""""""""""	Bronch	niect	asis								1
Bronchitis	Whoop	oing	cough			••••					2
Pulmonary tuberculosis	Measle	s									3
Pulmonary tuberculosis	Broncl	hitis				*					4
The actual number of cases treated was 70, including:— Notified as scarlet fever			tuberculo	cic							1
The actual number of cases treated was 70, including:— Notified as scarlet fever	T umio	mary	tubercuro	515							•
The actual number of cases treated was 70, including:— Notified as scarlet fever											
Notified as scarlet fever 3 ,, ,, gastro-enteritis 5 ,, ,, dysentery 1 ,, ,, meningitis 19 ,, ,, whooping cough 1 ,, ,, tuberculosis 3 ,, ,, diphtheria 3 ,, ,, poliomyelitis 8 ,, ,, puerperal pyrexia 1 ,, ,, whooping cough 10											11
Notified as scarlet fever 3 ,, ,, gastro-enteritis 5 ,, ,, dysentery 1 ,, ,, meningitis 19 ,, ,, whooping cough 1 ,, ,, tuberculosis 3 ,, ,, diphtheria 3 ,, ,, poliomyelitis 8 ,, ,, puerperal pyrexia 1 ,, ,, whooping cough 10											
Notified as scarlet fever 3 ,, ,, gastro-enteritis 5 ,, ,, dysentery 1 ,, , meningitis 19 ,, , whooping cough 1 ,, , tuberculosis 3 ,, , diphtheria 3 ,, , poliomyelitis 8 ,, , puerperal pyrexia 1 ,, , rubella 2 ,, , whooping cough 10	CD1			c					1 1'		
""">""" gastro-enteritis 5 """">""" dysentery 1 """">""" whooping cough 1 """ tuberculosis 1 """" diphtheria 3 """" poliomyelitis 8 """" rubella 2 """" whooping cough 10	The a	acti	ial numbe	er of ca	ises	treated	was	70, in	cludin	g:—	
""" "	Notifie	ed as	s scarlet fev	ver							3
""" dysentery """ 19 """ whooping cough """ 1 """ tuberculosis """ 1 """ diphtheria """ 3 """ poliomyelitis """ 8 """ rubella """ 2 """ whooping cough """" 10			gastro-ent	eritis							5
""" """ meningitis """ """ """ """ """ """ """ """ """ "			_								1
, , , , whooping cough			, ,								19
, , , tuberculosis			0								
""">""">""" tabeled like in the control of the con	,,		1 0	_							
,, poliomyelitis 8 ,, puerperal pyrexia 1 ,, rubella 2 ,, whooping cough 10	,,										_
,, ,, puerperal pyrexia	,,	"	*								
,, ,, rubella 2 ,, ,, whooping cough 10	,,	,,	1 2								
" ,, whooping cough		2.2		pyrexia							_
,, ,, whooping cough	"	"									
54	,,	,,	whooping	cough							10
54											
											54

There were 5 deaths.

Rubella

During the year there were 95 cases notified as suffering from rubella, but of these twenty-three required revision of diagnosis as follow:—

ч		5		1						
	Measles									8
	Mastoiditis									1
	Whooping coug	gh								1
	Scarlet fever								••••	6
	Lobar pneumor	nia		·						2
	Erythema of un	nknown	origin							3
	Urticaria									1
	Scabies									1
									_	
										23
									-	
	There were 1	11 tru	ie case	es trea	ted or	the '	wards,	inclu	ding:—	
	Notified as scar	let feve	er							7
	,, ,, mea	sles		••••						30

Smallpox

There were three notified cases of smallpox, but all three required revision of diagnosis:—

Papular eryther	ma of	unknow			1	
Septic eruption			 	 	 	1
Chickenpox			 	 	 *	1

One mild case of true smallpox was treated at Witton Hospital.

Vincent's Angina

,, poliomyelitis

gastro-enteritis

Of the ten notified cases of Vincent's Angina, eight required revision:

Ludwig's angina			 	 	 1
Miliary tubercul	osis		 		 1 (died)
Ulcerative stoma	atitis		 		 3
Tonsillitis			 	 	 2
Pneumonia		••••	 		 1

There were two true cases and no deaths.

Encephalitis

There were seven cases notified as encephalitis of which six required revising :—

Glioma of right frontal	lobe				1 (died)
Fulminating pulmonary	y tuberculo	sis			1 (died)
Mumps					1
Healing vaccination					1
Perforated appendix w	ith periton	itis			1
Perforated appendix w	ith append	ix absce	ess		1

6

1

1 --39

Operations

Eighty-two operations were performed in the theatre during the year:

4
19
8
3
3
1
1
1
22
82

The surgeons attended on sixty-four occasions to perform the above operations. Eleven of the minor miscellaneous operations were performed by the resident staff.

Staff Prophylaxis

All members of the nursing staff were Schick and Dick tested soon after entering the hospital.

Dick and Schick tested			 57
Dick negative and Schick negative			 29
Dick positive and Schick positive .			 4
Dick positive and Schick negative .			 9
Dick negative and Schick positive .			 15
		Total	 57
			-
Schick positive			 19
Acquired immunity after treatment .			 16
Left before complete			 2
Required further course before negative	е	****	1
		Total	 19

Dick positive			 13
Acquired immunity after treatment			 11
Left before complete			 1
Required further course before negativ	e		 1
-			
		Total	 13

In addition all members of the nursing staff are tested at six-monthly intervals.

Sickness amongst the Staff during 1947

Colds and coughs							11
Tonsillitis and sore thro	ats						19
Diarrhoea and vomiting							6
Influenza							2
Blisters, burns and scale	ds						6
Septic fingers							4
Chickenpox							3
General malaise							3
Cuts and bruises							2
Mumps				••••			2
Abscess							1
Appendicitis							1
Dlanharitia							1
Callulitie							1
Dysentery							1
Cantus antonitis							1
Infection homotitie							1
Tangillantamy							1
TT- d-land force							1
Duballa		••••			•••••		7
Missellansons	•••		*****		•••••	•••••	22
wiscenaneous					•••••	•••••	44

X-Ray

During the year 448 cases were X-rayed for the following reasons:

96

Chest symptoms						 346
Routine examination,	Nurses	5				 28
Suspected injuries:	Upper	limbs				 10
	Lower	limbs				 11
	Skull					 2
	Spine					 1
Suspected disease:	Upper	limbs				 6
	Lower	limbs				 27
	Skull		•			 9
	Spine					 5
Foreign bodies						 3
-, -						
				Тот	AL	 448

Summary of Specimens Examined in Laboratory

Swabs—B. diphtheria				19			1,458		
Swabs—Vincent's angina							108		
Swabs—Organisms							39		
Pus—Organisms							31		
Sputum-microscopical and	cultur	ral					35		
Pleural fluids-microscopica	l and	cultural	l				12		
Blood cultures							21		
Urines-chemical and micro	scopic	al					214		
Cerebro-spinal fluids—chemical, cytological and bacteriological									
Stools—amoeba							10		
Stools—tubercle bacilli							2		
Stools—occult blood							2		
Blood-Widal tests							14		
Blood—miscellaneous							4		
Miscellaneous examinations							5		
Cultures for B.diphtheria pro	epared	l for Cit	y Lab	oratory			1,451		
Cultures for haemolytic streptococci prepared for City Laboratory									
							5,790		

PREVENTION OF BLINDNESS

General Outline of Facilities Available in the City.

The arrangements continue substantially on the lines and over the same range of services as immediately before the war.

The number of Birmingham residents on the blind register at the end of 1947 was 673 males and 668 females, a total of 1,341, which is nineteen more than at the end of 1946.

REPORT ON TUBERCULOSIS

By Dr. J. E. GEDDES, Chief Clinical Tuberculosis Officer

The Health Committee maintain a single dispensary centrally situated in the City, and provide 751 beds in four sanatoria for the treatment of all forms of tuberculosis in adults and children.

The beds are allocated as follows:-

	Men	Women	Children	Total
City Sanatorium, Yardley Green	ı			
Road	. 194	144	75	413*
West Heath Sanatorium	. 63	87	sinanna	150
Romsley Hill Sanatorium	. 75	45	<u>_</u>	120*
Salterley Grange Sanatorium	. 38	30		68
	370	306	75	751

^{*} Inclusive of 28 observation beds in the City Sanatorium, Yardley, and 32 beds in the Romsley Hill Sanatorium rented to other authorities.

During 1947 the normal complement of beds was available but 20 beds in the Romsley Hill Sanatorium were closed throughout the year because of shortage of nursing staff, and 30 beds in the West Heath Sanatorium were closed for a considerable period for structural alterations.

The number of patients awaiting admission and the duration of treatment during 1947 are shown in the following statement:—

	Average number of patients on waiting	Average period on	Average duration of sanatorium		
	list each month	Waiting list	treatment		
Men	131	27 weeks	191 days		
Women	119	38 ,,	227 ,,		
Children	44	40 ,,	341 ,,		

These are unsatisfactory records. The number of patients on the waiting list on 31st December, 1947, was 268, which represents 44.8 per cent. of the number of patients in the sanatoria on that date. The average waiting period throughout the year was 245 days. Circumstances of this kind are a most formidable handicap, and particular attention has been given by the Tuberculosis Sub-Committee to the need to acquire additional accommodation for the treatment of all forms of tuberculosis in adults and children.

Staff

Despite considerable efforts in various directions there was again no improvement in the recruitment of staff. Work in each sanatorium was made difficult because of shortage of staff. Standards have been difficult to maintain, but it is most appropriate to acknowledge the ready assistance of all members of the present nursing and domestic staff in circumstances of real difficulty.

Notifications

The notification rate during 1947 for all forms of tuberculosis was 1.31 per 1,000 population, an increase in comparison with the figures for 1946 of 107 or 0.10 per 1,000 of the population.

The pulmonary rate was $1\cdot14$ and the non-pulmonary rate $0\cdot17$ per 1,000 of the population. In comparison with 1946, the pulmonary rate has increased by 88 cases or $0\cdot08$ per 1,000 of the population, and the non-pulmonary rate by 19 cases or $0\cdot02$ per 1,000 of the population.

Mortality

The mortality rate during 1947 from all forms of tuberculosis was 0.70 per 1,000 population, which represents in comparison with 1946 an increase of 59 deaths or 0.05 per 1,000 of the population.

The pulmonary mortality rate was 0.64 and the non-pulmonary rate 0.05 per 1,000 of the population.

In comparison with 1946 the pulmonary rate has increased by 75 deaths or 0.07 per 1,000 of the population and the non-pulmonary rate has decreased by 16 deaths or 0.01 per 1,000 of the population.

The number of cases and deaths occurring in past years are shown in the following tables:—

TUBERCULOSIS (All forms)

		New Cases	Rate per 1,000 Population	Deaths	Death-rate per 1,000 Population
1901—1910 (average)	••••		_	1,309	1.65
1911—1920 ,,	*****	-		1,284	1.46
1921—1930 ,,		1,824	1.91	1,031	1.08
1931—1935 ,,	••••	1,459	1.43	928	0.91
1936	•••••	1,136	1.10	805	0.78
1937	****	1,119	1.07	836	0.80
1938	*****	1,209	1.15	813	0.78
1939	****	1,036	0.98	885	0.84
1940	****	1,049	1.03	855	0.84
1941		1,073	1.13	850	0.90
1942	****	1,257	1.30	833	0.86
1943	****	1,239	1.28	750	0.78
1944	****	1,371	1.38	782	0.79
1945	****	1,348	1.36	749	0.76
1946	****	1,300	1.28	689	0.68
1947		1,407	1.31	748	0.70

The relative prevalence and mortality from pulmonary and other forms of tuberculosis are shown in the two subsequent tables:—

PULMONARY TUBERCULOSIS

				Rate		Death-rate
			New	per 1,000	Deaths	per 1,000
			Cases	Population		Population
1901—19	10 (av	verage)	 _		993	1.25
191119	20	**	 _	_	1,059	1.20
192119	30	,,	 1,533	1.61	892	0.94
1931—19	35	,,	 1,225	1.20	824	0.80
1936			 962	0.93	734	0.71
1937			 965	0.93	756	0.72
1938			 1,011	0.96	732	0.70
1939			 863	0.82	808	0.77
1940		••••	 899	0.88	786	0.77
1941			 922	0.97	768	0.81
1942	••••		 1,069	1.11	745	0.77
1943			 1,106	1.14	681	0.71
1944			 1,190	1.20	696	0.70
1945			 1,193	1.21	671	0.68
1946			 1,135	1.12	616	0.61
1947			 1,223	1.14	691	0.64

NON-PULMONARY TUBERCULOSIS

				Rate		Death rate
			New	per 1,000	Deaths	per 1,000
			Cases	Population		Population
1901—1910 (aver	rage) .	.,	_		317	0.40
1911—1920 ,	,,,	••••			224	0.26
1921—1930 ,	, .		290	0.31	139	0.14
1931—1935	,		234	0.23	104	0.10
1936			174	0.17	71	0.07
1937			154	0.15	80	0.08
1938	,	,	198	0.19	81	0.08
1939			173	0.16	77	0.07
1940			150	0.15	69	0.07
1941			151	0.16	82	0.09
1942			188	0.19	88	0.09
1943			133	0.14	69	0.07
1944			181	0.18	86	0.09
1945		••••	155	0.16	78	0.08
1946			165	0.16	73	0.07
1947			184	0.17	57	0.05

The localisation of the disease in the case of the 57 deaths from non-pulmonary tuberculosis is shown in statement (a), and an analysis according to sex and age of all notifications and deaths is given in statement (b):—

Tuberculous meningitis							26
Abdominal tuberculosis							9
Bone and joint tuberculosis							4
Disseminated tuberculosis							15
Tuberculosis of other organs							3
	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis	Abdominal tuberculosis Bone and joint tuberculosis Disseminated tuberculosis

PULMONARY TUBERCULOSIS

				Male		Fer	nale
Age				Cases	Deaths	Cases	Deaths
0			••••	 5	2	3	4
1-2				 26	11	17	11
-3-4				 17	1	14	1
5—14				 45	4	37	3
15-24				 168	33	180	79
25-44				 233	146	184	110
4564				 202	187	53	48
65—74				 28	32	5	9
75 and a	bove		••••	 3	6	3	4
		•		727	422	496	269

Total Cases, 1,223; Total Deaths, 691

NON-PULMONARY TUBERCULOSIS

				Ma	ale	Fe	male
Age			- 4	Cases	Deaths	Cases	Deaths
0—		 		1	1	2	1
1-2		 		15	3	10	5
3-4		 		8	4	6	3
5-14		 		20	5	18	7
15-24		 		14	3	28	8
25-44		 		16	3	18	7
45—64		 		16	4	8	
65—74		 		1	' 1	3	2
75 and a	bove	 					
				91	24	93	33

Total Cases, 184; Total Deaths. Grand Totals: Cases 1.407 Deaths

NOTIFICATION RATE

748

Pulmonary Tuberculosis

(b)

The number of cases of pulmonary tuberculosis notified during 1947 was 360 (41.7%) above the notification figure for 1939, and is the highest recorded since 1933. There has been a steady increase in the number of annual notifications of pulmonary tuberculosis during the past nine years from 863 in 1939 to 1,223 in 1947. These figures no doubt mean an actual increase in incidence and to that extent are unsatisfactory, but the general attention given in recent years to early diagnosis may well have influenced these figures, and that aspect of the problem requires consideration. Its significance may at least be inferred from the statement on page 7 which shows that in 947 cases of pulmonary tuberculosis in adults examined during 1947, 229 or 24.2% were cases of early pulmonary tuberculosis, whilst in 1939, the comparable figure was 98 or 14.6%.

Non-Pulmonary Tuberculosis

The number of cases of non-pulmonary tuberculosis notified during 1947 was 11 $(6\cdot4\%)$ above the notification figure for 1939. The figures of notification for non-pulmonary tuberculosis have undergone little alteration in the past nine years.

Non-Notification

The number of deaths from non-notified pulmonary tuberculosis was 60 or 8.7% and from non-pulmonary tuberculosis 13 or 22.8%.

The percentage of non-notified deaths from all forms of tuberculosis was therefore 9.8% but in 32 cases the diagnosis was established following an autopsy, and the corrected figure is 5.5% of the total deaths from all forms of tuberculosis. The figure for 1946 was 3.5%.

MORTALITY RATE

Pulmonary Tuberculosis

The mortality rate from pulmonary tuberculosis shows a slight increase on the figure for 1946, but is, with the exception of that year, the lowest so far recorded. This low rate despite the substantial increase in notifications since 1939 is altogether satisfactory, and provides additional information by which the significance of the increase in notifications can be suitably judged.

Non-Pulmonary Tuberculosis

The mortality rate from non-pulmonary tuberculosis is the lowest so far recorded.

ANTI-TUBERCULOSIS CENTRE

Senior Assistant Tuberculosis Officer, Dr. J. R. A. D. Todhunter.

The Anti-Tuberculosis Centre is open throughout the week, on Saturdays for the half-day, and one evening session is held.

The medical staff employed at the Centre, with the exception of Dr. Todhunter and Dr. Gilmore, are also responsible for the administrative and clinical work of the municipal sanatoria.

The number of patients on the tuberculosis register on 31st December, 1947, was 6,978; the number transferred to other areas during the year and the untraced cases numbered 242; the number transferred to this area from other areas and untraced cases identified was 179.

During the year 1,223 new cases of pulmonary tuberculosis were notified, and of that number 1,046 or 85.5% were examined at the Centre.

The work undertaken at the Centre during 1946 and 1947 is shown in the following statement:—

	1946	1947
Attendances for consultation and examination	13,329	13,769
Attendances for supervision and treatment	1,454	1,650
Attendances for X-ray examination	17,573	17,567
Attendances for artificial pneumothorax treatment	3,934	4,791
Attendances for artificial light treatment	925	508
	37,215	38,285
	-	

The mobile radiography work introduced last year has been of value and during the year the team visited 39 homes. The X-Ray team concerned is also responsible for radiological work at the Yardley Green Road Sanatorium and the time now available for this domiciliary work is somewhat limited.

The following tables show the classification of patients examined at the centre during the year:—

Classification of those Patients who were examined for the First time during 1947

ADULTS.

PULMONARY

			Ν	Newly		Ma	ss Radiography
			No	tified	Contacts	Suspects	Suspects
A1				90	7	84	2
A2				66	18	115	9
A3				30	1	45	2
В1				20		18	8
B2				97	16	124	12
В3				91	3	88	1
Non-Pul	.MONAR	.Y					
A				37		30	
B.				2		_	_
No evice Pulmos		of A ubercul		106	663	3,722	102
				539	708	4,226	136

CHILDREN

				Newly		M	ass Radiography
			N	otified	Contacts	Suspects	Suspects
PULMONA	RY						
A1				22	39	19	2
A2	••••			3	2	1	_
A3	•••••			4	2	2	_
В1				_	_	_	_
B2				1	_	_	_
В3				2	_		
Non-Pul	MONAR	RY					
Α.				20	1	9	_
В.				1		1	_
No evid	lence	of a	ctive				
pulmor	nary tu	berculo	sis	47	607	805	2
				100	651	837	4

Reference has been made in previous reports to the considerable proportion of adult cases of pulmonary tuberculosis showing evidence of advanced disease on initial examination.

The figure for 1939 was 40.9%; for 1943, 36.4%; for 1944, 30%; for 1945, 30%; for 1946, 23.4%; and for 1947, 27.6%.

These figures show, despite the small increase for 1947, a distinct improvement and it is most unfortunate that the improvement should coincide with conditions which make prompt sanatorium treatment impossible.

TREATMENT RECOMMENDED FOR THOSE PATIENTS WHO WERE EXAMINED FOR THE FIRST TIME DURING 1947.

ADULTS

	Newly		Mass Radiogra			
	notified	Contacts	Suspects	Suspects		
Sanatorium treatment	301	35	377	25		
Dispensary treatment	2	_	2	_		
Out-patient artificial ligh	.t					
treatment	6	_	9	-		
Supervision	40	_	38	2		
Domiciliary treatment	84	10	78	7		
No treatment required	106	663	3,722	102		
	539	708	4,226	136		

CHILDREN

		Newly		Mass Radiograp				
	no	tified	Contacts	Suspects	Suspects			
Sanatorium treatment		37	33	20	1			
Supervision		5	4	6	1			
Out-patient artificial li	ight							
treatment		2	_	1				
Domiciliary treatment		9	7	5	and the same of th			
No treatment required		47	607	805	2			
		100	651	837	4			

TREATMENT RECOMMENDED FOR THOSE PATIENTS WHO WERE RE-EXAMINED DURING 1947

ADULTS

	Definite		
	Cases	Contacts	Suspects
Sanatorium treatment	281	magnish	5
Dispensary treatment	20	_	_
Supervision	1,105	1	
Out-patient artificial li	ght		
treatment	10	_	—
Domiciliary treatment	2,037	_	4
No treatment required	919	199	927
	4,372	200	936

CHILDREN

	I	Definite		
		cases	Contacts	Suspects
Sanatorium treatment		19	3	2
Dispensary treatment		1		_
Supervision		293	1	1
Out-patient artificial l	ight			
treatment		3		
Domiciliary treatment		50		
No treatment required	····•	91	365	231
		457	369	234

Contacts

The number of contacts examined in relation to the total notifications for 1947 and to individuals on the Tuberculosis Register is obviously inadequate. Supervision is defective and an extension of this work is essential.

Arrangements have been made with Dr. Halliday Sutherland for the supervision of contacts by miniature radiography. The scheme was completed by the end of the year and at the first sessions 895 contacts—60.4% of those invited to attend—were examined, but the figures are excluded from the following table. This extension of the scheme should prove of considerable value. It has added to the work of the Tuberculosis Visitors but their interest and that of Miss Turney who has undertaken the clerical organisation of the scheme has given impetus to this new endeavour in supervision.

CONTACTS EXAMINED DURING 1947

	Numl	per of Cases	with spu	cts to patients tum containing rcle bacilli	wii	cts to patients th negative putum
0 to 5 years Tuberculous	39	10.4%	25	78.1%	7	21.9%
Non-Tuberculous		89.6%	154	70		44.2%
_	308		179		129	
6 to 15 years						
Tuberculous	16	4.3%	9	56.3%	7	43.7%
Non-Tuberculous	360	95.7%	184	51.1%	176	48.9%
	376		193		183	
16 years and over:						
Tuberculous	43	6.4%	22	51.2%	21	48.8%
Non-Tuberculous	632	93.6%	358	56.6%	274	43.4%
	675		380		295	

It is of interest to compare the incidence of active tuberculosis in these contacts (16 years and above), with the number detected under the mass radiography scheme. The figures are 6.4% and 0.21% respectively.

Dental Treatment

Dentist: Mr. W. A. Stockwin.

One dental session is held each week. The following work was undertaken:—

Extractions				224
Scalings and fillings				 26
Dentures				 22

Work of the Tuberculosis Visitors

There are ten nurses engaged as Tuberculosis Visitors in the department. The visitors are concerned with the domiciliary welfare of the patient; the range of their duties is wide, and the character of the work

varied. It is their primary duty to make enquiry into every case of tuberculosis, and maintain by regular visits close contact with the patient in his home.

After-care in all its aspects is the concern of the visitor, and an indication of the scope of the work is shown in the following statement:—

VISITS PAID BY THE TUBERCULOSIS VISITORS DURING 1946 AND 1947

			1946	1947
Primary visits (to new cases)			1,618	1,697
Routine re-visits			21,792	18,923
Special visits and re-visits			7,421	6,977

The following statement gives an indication of certain of the aftercare activities of the department:—

		1946	1947
Beds issued		349	377
Chalets provided		13	12
Grants of clothing and nursing appliances		559	487
Number of fares paid for patients		285	124
Allowances granted		610	664
Grants of food made		96	192
Red Cross Society parcels recommended		188	190

(The provision of chalets is governed by the fitness of the patient to sleep or rest unattended for prolonged periods out of doors).

The close co-operation existing between the Anti-Tuberculosis service, the School Medical Officer's Department, and the Maternity and Child Welfare Department, is most valuable, and has provided opportunities for the after-care service to be widely applied.

Disinfection

The disinfection of 1,459 houses where a member of the family had suffered or died from tuberculosis, or changed his or her address, was carried out during the year.

Housing

The housing problem during the year has continued to be a difficult one, but despite these difficulties the Estates Department has been able to offer suitable accommodation to 215 tuberculous families. That in present circumstances is a good record and the co-operation of the Estates Committee has been of the utmost importance.

There are in the present circumstances however no grounds for complacency, and until conditions in the home support the work of the health visitors and of the sanatoria, progress in the control of tuberculosis will continue to be defective.

Action Under Legal Enactment

It was unnecessary during the year to take action under the Public Health (Prevention of Tuberculosis) Regulations, 1925, relating to tuberculous employees in the milk trade; nor was Section 172 of the Public Health Act, 1936, employed to remove any patient compulsorily to a sanatorium.

Allowances

The following table shows the applications received during the year:—

(Memo. 266/T Scheme and General Scheme).

Ineligible for financial and domestic reasons	Number 70	Percentage of total applications 8:610
Applicants in sanatoria and without dependants	73	8.979
Left City	3	·369
Died	2	.246
Settlement Law involved	1	·123
	149	18.327

The total payment of allowances during the year was Memo.: 266/T Scheme, £25,814 11s. 7d.; Public Health Scheme, £14,290 3s. 0d. A total of £40,104 14s. 7d.

SANATORIA

	Matron	Medical Superintendent
Yardley Green Road Sanatorium	Miss W. Davies	Dr. J. E. Geddes
West Heath Sanatorium	Miss E. G. Davis	Dr. J. McWm. Taylor
Romsley Hill Sanatorium	Miss D. Lee	Dr. D. J. Peebles
Salterley Grange Sanatorium	Miss M. Ross	Dr. D. C. Waddy

Reference has been made in an earlier section of this report to the difficulties which have been experienced in the general recruitment of staff. This shortage has greatly increased the responsibilities of the matrons and of the senior administrative nursing officers of the City sanatoria. I have again satisfaction in recording the very able manner in which over the year they have allocated the reduced staff to the various departments, and by their own competence and keenness ensured the maximum efficiency in circumstances of great difficulty. The shortage of staff has increased equally the work of the ward sisters and the junior nursing staff; the service owes much to their vigorous collaboration under the constant trial of inadequately staffed wards.

The following table shows the duration and result of treatment of 985 patients discharged from the municipal sanatoria, who were resident for a period of more than one month:—

RESULTS OF TREATMENT IN PATIENTS DISCHARGED FROM SANATORIA DURING THE YEAR 1947

2. Duration of residential treatment in the Sanatoria and the San	-
Duration of residential treatment in the Sanatoria 3-6 months 6-12 months More than 3-6 months 6-12 months More than M. F. Ch. M. F. Ch. M. F. Ch. M. F. Ch. M. M. F. Ch. M. 26 34 - 23 16 - 1	4 - 16
Duration of residential treatment in the Sanatoria 3-6 months 6-12 months More than 12 months 12 months M. F. Ch. M. F. Ch. M. F. Ch. M. F. Ch. M. F. Ch. 6 7	4
	1
	1
	9
	1 1
	1
	1 -
	1 2
	1 1
	1 6
0 . 0 - 1 10 - 1 10 - 4 - 1 10 0 -	4
ing Single 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12
Under 3 months but exceeding 28 days M. F. Ch. 3	1 8
Candel out Candel out Suff 1 2 3 3 4 4 5 6 6 6 7 8 9 1 1 1 1 2 2 2 3 3 4 4 5 6 6 6 7 8 8 9 1 1 1 1 1 1 1 <t< td=""><td>1 4</td></t<>	1 4
Condition on discharge discharge Quiescent Not quiescent Died in Sanatoria Quiescent Not quiescent Died in Sanatoria Quiescent Not quiescent Died in Sanatoria Ouiescent Not quiescent Died in Sanatoria Ouiescent Died in Sanatoria Ouiescent Died in Sanatoria Ouiescent Died in Sanatoria Ouiescent Not quiescent Died in Sanatoria Ouiescent Not quiescent Died in Sanatoria	Totals
T.B. minus T.B. minus T.B. plus Group II T.B. plus Group III Abdominal Abdominal Other organs Peripheral Glands	
Non-Pulmonary Pulmonary Tuberculosis Tuberculosis	

Average Duration of Residence

-			1946	1947
Adult males	 	 	 180 days	191 days
Adult females	 		 199 ,,	227 ,,
Boys	 	 	 293 ,,	311 ,,
Girls	 	 	 391 ,,	371 ,,

The above figures exclude patients admitted for observation who were in residence for a short period, and cases with advanced disease who died within a few days following admission.

Observation Beds

The Anti-Tuberculosis Scheme includes 28 beds at the City sanatorium for the purpose of observation and investigation. "Observation" patients are those who, after careful and repeated examinations at the Centre, are found to be indefinite either as to the absence or presence of tuberculosis or as to its activity or quiescence when present.

Of the 1,208 patients discharged from the sanatoria, 119 or 9.85% were admitted primarily for observation to the Yardley Green Road Sanatorium. The results of investigation are shown in the following table:

Diagnosis on discharge from		T iy ur	or Pr uberc uder ks	u l osi St	,	ver	Sta	T y ur	Non-l uberc ider ks	ulosi. Sta	s ay o	ver	Τ	`otal	s -
observation ward	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	Μ.	F.	Ch.
Tuberculous	8	15	10	5	7	12		_	_		1		13	23	22
Non-tuberculous	15	9	2	16	13	6	-	-	-	_	-	-	31	22	8
Doubtful		_		_			_								
	23	24	12	21	20	18				_	1		44	45	30

Hospital Beds

The scheme is fortunate in that it has a certain number of beds for the care and treatment of the patient with advanced pulmonary tuberculosis. The beds are valuable as a prophylactic asset in connection with the maintenance of the public health of the City.

During the period under review there were 748 deaths in the City from all forms of tuberculosis. Of this number 348 or 46.5% occurred at home; 114 or 15.2% in hospitals controlled by the Public Health Department; 67 or 9% in other hospitals; and 219 or 29.3% in sanatoria. Of the 219 deaths in sanatoria, 73 or 33.3% occurred within one month of admission.

Thoracic Surgery

The surgical work of the Department has been further extended under the direction of Mr. A. L. d'Abreu. Arrangements have been made for Mr. d'Abreu to hold consultation sessions at each sanatorium and also at the Anti-Tuberculosis Centre. During 1947 the following sessions were arranged:—

Romsley Hill Sanatorium			 	9
Salterley Grange Sanatorium		.111.		6
West Heath Sanatorium				11
Anti-Tuberculosis Centre				20

The number of operations performed since January, 1947, was as follows:—

Thoracoplasty			 				66
Thoracoscopy			 			 	76
Phrenic crush o	r evulsi	ion					51
Thoracotomy							1
Pneumonectom	у		 	().	().		3
Bronchoscopy							22
Miscellaneous							31

I desire to acknowledge the great services of Mr. A. L. d'Abreu, F.R.C.S., consultant thoracic surgeon, Mr. J. B. Leather, F.R.C.S., the consultant orthopædic surgeon, and Dr. M. Galbraith, the visiting anæsthetist.

X-Ray Department, City Sanatorium

The following table shows the number of radiographs taken during the year:—

Pulmonary radiograph	s			 3,636
Bronchographs		 		177
Pyelographs				 193
Bone and joint radiogr	aphs	 		 739
Gastric and intestinal	radiographs	 		39
				4,784
Pulmonary radioscopy		 		2,533
	TOTAL	 		7,317

Laboratory Service

Reference was made in the report for 1945 to the general re-organisation of the laboratory service and the following statement of the work undertaken is submitted. It relates solely to specimens submitted to the laboratory from the Yardley Green Road Sanatorium.

Nations of Ch	Total	Laboratory Disposal					
Nature of Sp	ecimen		Number	*Y.G.Rd	*C.B.L.	*D.R.H.	*B.T.U.
BACTERIOLOGICAL							
Sputum San	nples e	xamined	4,931	4,512	370	49	
Gastric Sediment	-,,	,,	295		295	_	
Pleural Fluid	,,	,,	99	11	74	14	
Pus	,,	,,	187	29	111	47	
Urine	,,	,,	248	19	229		
Faeces	,,	,,	1,130	699	431		
Swabs	,,	,,	129	- 1	129		_
C.S.F.	,,	,,	35	6	15	14	_
Sewage Effluent	,,	,,	1		1)	_
Pericardial Fluid	,,	"	2	/	1	1	
Blood, Culture	,,	,,	2		2		-
Ascitic Fluid	,,	,,	3		2	1	
Synovial Fluid	,,	"	1		1		
Blood, full widal	,,	,,	5	_	5	_	<u> </u>
WR & Kahn	,,	,,	94		94		_
Gonococcal Fixa-		.,					
tion Test	,,	,,	1		1		_
Faeces, Helminths	,,	,,	8	8			_
HAEMATOLOGICAL	,,	"	978	789	_		189
BIOCHEMICAL							
Blood	,,	,,	190		_	190	<u> </u>
Urinalysis	,,	,,	163	163		_ `	
Urine	,,	,,	81	48		33	
C.S.F. Chlorides	,,	,,	6	4		2	
Faeces	,,	,,	13	9		4	_
Glucose Tolerance							
Test	,,	,,	1	/		1	_
Fractional Test Me		"	3			3	_
Pathological							
Specimens for History	ology	,,	39			39	_
Sputum, Malignani		,,	11			11	-
Pus, ,,	,,	,,	3	_	- /	3	_
Pleural fluid	,,	,,	5	_		5	
Тот	ALS		8,664	6,297	1,761	417	189

^{*}Y.G.Rd.=Yardley Green Road Sanatorium Laboratory.

Laboratory, Anti-Tuberculosis Centre

In addition to these samples, 7,243 specimens of sputum were examined at the Anti-Tuberculosis Centre.

C.B.L. = City Bacteriological Laboratory.

D.R.H. = Pathological Department, Dudley Road Hospital.

B.T.U. = Blood Transfusion Unit.

School

Staff: Headmistress (Miss M. M. Elrick), and two assistant teachers. The general organisation and curriculum were mentioned in previous reports. No alteration of significance has been made during the year.

	O				 	-6	y car.
Number of children	on roll,	1st J	anuary,	1947			33
Number admitted							47
Number discharged							39
Number of children	on roll,	31st	Decemb	er, 1947			41

Rehabilitation

The workshop attached to the Yardley Green Road Sanatorium continues to find sheltered employment for a small number of patients. During the year 41 patients were accepted as trainees and patient employees. The special department inaugurated during 1945 now provides all splints for the sanatorium.

A rehabilitation (employment) clinic has been established at the Anti-Tuberculosis Centre and is under the immediate direction of Dr. J. M. Gilmore. The Divisional Rehabilitation Officer (Ministry of Labour), attends this clinic every week and all patients classified as fit for work by the medical officers are referred to the clinic. During the year 99 patients were interviewed, and part-time employment of a comparatively suitable nature obtained for 84 of these patients.

In addition arrangements were made for twenty-one patients to undergo a course of vocational training. The work of this clinic has increased during the year and its value becomes apparent. The delay in the erection of the factory has however reduced the scope of the work, but Dr. Gilmore has established the foundation and has made good progress with the scheme despite difficulties.

Mass Radiography

Executive Medical Officer: Dr. Halliday Sutherland.

Mass Radiography surveys were introduced in Birmingham during October, 1944, and by December, 1947, 110,266 visitors had been examined.

There has been no alteration of importance in the practice of mass radiography during the year.

The following groups have been examined:-

General

- (a) Employees from large and small factories.
- (b) Pupils from Technical and Grammar Schools.
- (c) University Students.
- (d) Members of juvenile clubs.

Special

- (a) Patients from the Diabetic Clinic, General Hospital.
- (b) Expectant mothers attending the Ante-Natal Centres in the City.
- (c) Contacts.

The following tabular statement shows the main statistical facts:—

MASS RADIOGRAPHY—(Statistics of Surveys held from 4.9.44 to 31.12.47)

2			
Percentage of visitors originally examined 8.0%	Percentage of visitors originally examined 3.5%	Percentage of visitors originally examined	Percentage of visitors originally examined 0.9%
Total abnormal miniature films 8,788	Number of abnormal large films 3,912	Number of visitors who accepted invitation for clinical examination 1,982	Number of visitors referred for further investigation 999
Number of faulty miniature films (technical) 611 (0.55% of those originally examined)	Number of visitors who did not respond to invitation for large film 239 (2.7% of total recalls for large films)	Number of visitors with abnormal large films judged to be of clinical significance who were called for clinical examination 2,017 (51.6% of total abnormal large films)	
Number of abnormal miniature films 8,177 (7-4% of those originally examined)	Number of large films taken 8,549	Number of visitors with abnormal large films judged to be of no clinical significance 1,895 (48.4% of total abnormal large films)	
Number of miniature films taken 110,266	Number of abnormal miniature films 8,788	Number of abnormal large films	Number of visitors who attended for clinical examination 1,982

Number of visitors who did not respond to invitation for large film or clinical examination 274=0.25% of visitors originally examined

The disposal of 971 of the 999 visitors referred from the unit for further investigation whose examination at the Anti-Tuterculosis Centre was completed by the end of December, 1947, is shown in the following statement:—

Referred to General Practitioner	88	Percentage of those originally examined	1.5%	$\begin{array}{c} 0.21\% \\ 0.19\% \\ 0.02\% \end{array} \} \begin{array}{c} 0.21\% \\ 0.02\% \end{array}$	%80.0
Referred to Tuberculosis Officer outside the Birmingham area	157	Perce origin			
Failed to attend for further examination	36	Number	1,559	236 213 23	87
Observation in Sanatorium	33				sputum positive
Admission to Sanatorium	85	as as follows :—	•		ry tuberculosis with
Supervision from Anti-Tuberculosis Centre	418	The number of cases of tuberculosis detected was as follows:—	ling healed lesions)	 (b) Number of cases of active tuberculosis (1) Post primary tuberculosis (2) Primary tuberculosis 	pulmona
No treatment required	154	nber of cases of tuk	(a) All groups (including healed lesions)	Number of cases (1) Post pr (2) Primar	Number of cases of active for tubercle bacilli
Total	971	The nun	(a)	(<i>p</i>)	(9)

The number of cases of active pulmonary tuberculosis detected was thus 236 or 0.21% of those initially examined.

MASS RADIOGRAPHY: GRAMMAR SCHOOL AND TECHNICAL SCHOOL PUPILS.

The examinations undertaken during 1947 included surveys of Grammar School and Technical School pupils.

The examinations were undertaken at the Central Mass Radiography department.

Total number of pupils concerned	6,535
Number who accepted invitation to attend Radiography Department	Mass 5,721 (87·5 per cent.)
Number of miniature films taken	5,721
Number of "abnormal" miniature films	235 (4·1 per cent. of total miniature films)
Number of large films taken 232	•
-	235
Number of children who failed to	
return for large films 3	
(b) Number of children with abnormal large	film
judged to be of clinical significance	46 (0.8 per cent. of total miniature films)
Number of children who failed to	
return for clinical examination	0.
Number of cases of tuberculosis (all forms)	26 (0.5 per cent. of total miniature films)
Active primary tuberculous lesions 0 Inactive primary tuberculous lesions 20 Active post-primary tuberculous lesions 1 Inactive post-primary tuberculous lesions 1 Inactive post-primary tuberculous lesions 3 Pleural effusion 2	26

Total Number of Cases of Active Tuberculosis—3 (or $\theta\cdot\theta 5$ per cent, of total miniature films taken).

These surveys have been undertaken with satisfactory co-operation of the parents and with the collaboration of the School Medical Officer.

Arrangements have been made to undertake an annual survey of all children in the Grammar and Technical Schools from the age of 14.

During 1947, 2,336 children who had previously attended the Mass Radiography department were examined. This scheme of annual radiography for these children has many advantages and whilst the number of cases of active pulmonary tuberculosis detected has been low, the educative value of the scheme warrants attention in any final assessment of its usefulness.

It will clearly become necessary when the surveys have been in operation for an appropriate period to consider the general arrangements in the light of the information obtained so that the scheme can be applied with maximum advantage.

I desire to record the very great advantage derived from the visits of Dr. James Brailsford, the consultant radiologist and to acknowledge the work developed by Dr. Halliday Sutherland and his staff throughout the year.

VENEREAL DISEASES

Happily the records for 1947 show a marked decline in new cases, as compared with what we may hope to be the high water mark of incidence in 1946.

The new cases of syphilis were not markedly higher than those in 1945, and were almost identical in number with those for 1944. The new cases of gonorrhœa were fewer than those in 1945, as well as in 1946.

The precise figures are included in the two tables which follow:--

		Syphilis	New Case Soft Chancre	es Gonorrhoea	Other Conditions
General Hospital		521		1,017	2,808
Children's Hospital		11			27
Lancaster Street	*****	56		16	1,154
Birmingham Infirmary		20		19	14
Total		608	_	1,052	4,003
		-		Lawrence -	

The following table gives the data over a period of ten years:—

			Soft		Other
		Syphilis	Chancre	Gonorrhoea	Conditions
1938		346		955	2,423
1939	 	330	1	948	2,282
1940	*****	318	1	835	1,957
1941		343	4	940	2,261
1942		515	2	1,030	2,906
1943		685		878	4,816
1944	*****	604		765	4,583
1945	*****	 567	_	1,061	4,695
1946		835		1,510	5,437
1947		608	_	1,052	4,003

The total attendances for treatment are indicated below:—

1938		 131,611	1943	 	97,973
1939		 88,083	1944	 	92,915
1940	••••	 75,936	1945	 	84,539
1941		 73,175	1946	 	96,515
1942		 83,776	1947	 	71,482

Further particulars of the work done at the Centres in 1947 are as follows:—

	Syphilis	Soft Chancre	Gonorrhoea	Other Conditions
No. of cases under treatment, Jan. 1st, 1947	1,916	_	530	569
New cases under treat- ment during year	608		1,052	4,003
Total attendances	41,371	15	11,266	18,830
No. discharged after completion of treatment and observation	545	3	919	4.005
	343	3	818	4,025
No. transferred to other centres	237	_	160	53
No. who ceased to attend: Before completion of treatment	202	_	22	_
After completion of treatment but before				
final tests as to cure	142	_	240	_

No. of cases of congenital syphilis treated:

Under 1 year of age	7	Aged 5-15 years	5
Aged 1-5 years	3	Aged 15 years and over	26
TOTAL		41	

The corresponding number of cases of congenital syphilis under treatment in 1946 was 48. The further reduction in this number from 66 in 1944, 68 in 1945, and 48 in 1946, to 41 in 1947, is a very satisfactory feature, reflecting credit on the effectiveness of the ante-natal care service, with its systematic examination from this as from other standpoints.

Contact Tracing

Defence Regulation 33B, which required that a person named as the contact by two separate sufferers from venereal disease should undergo medical examination and, if necessary, treatment, was withdrawn on 31st December, 1947.

During the year a contact who had been named on two occasions was transferred by a local authority in the North of England, and although she was traced and visited, she left the district within a few days, before treatment could be arranged.

The numbers of contacts in respect of whom a single Form 1 was received have continued to decline but, in spite of insufficient information being supplied in many cases, every effort has been made by the Almoner's Department and the special health visitors to persuade the contact to attend for examination, and treatment, if this should prove necessary.

Particulars under Regulation 33B

Number of contacts in respect of whom Form	ı I was	receiv	red		22
Not traced owing to insufficient information					10
Contacts found and visited					10
Contacts examined or already under treatme	ent				7
Number of contacts in respect of whom two	or a si	ubsequ	ent Fo	rm I	
were received					1
Not traced owing to insufficient information					
Contacts found and visited					1
Contacts examined or already under treatme	ent				
Contacts examined after service of Form II					
Prosecutions					

Educational Work

This is merged in the wider aspect of Health Education as a whole, and receives reference in the Maternity and Child Welfare section of this Report.

Crisq Birth

SR	fo st	Other Acciden	2001			4.1.	1.6	1.7	- 2	2.28	2.4.6	2.0	2.0.0	2.0	2.0	2.3	1.7	- 6		0.00	1.0	3
TES PER BIRTHS	190	Puerberal Fe	1.64	1.65 1.56	1.72	2.03	1.17	1.78	1.96 1.64	1.45	1.55	1.74	1.68	1.45	1.53	0.77	0.86	0.87	7.13	0.62	0.77	0.27
TH-RAT		Diarrhoea an Enteritis (und	? 10.8 35.5	27.3	18.5	9.00	16.6	9.5	. .	11.5 11.5	13.9	8.7	. 8.1	7.7.		5.1	13.7	8.6	8.6	0.9	0.00	1.7
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		Suicides		80.00 80 80.00 80.00 80.00 80.00 80 80 80 80 80 80 80 80 80 80 80 80 8	00.00	==:	100	101	==	.15	116	.15	.15	13	.12	.15	.15	4.0	:==	.08	202	
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	əni1298	Diseases of Di System	.95	1.31 1.36	88.	8.83 82.83	8 69 9	02.	.73	.73	.76	69 .	.59	.62	.e2	.56	.45	.56	.64	. 43 64.	4.4.	96.
	mə ₁ sA	Diseases of Respiratory S.	2.51	28.5 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6	22.10	2.46	20.02	1.98	1.97 2.10		2.26	1.78 1.61	1.32	1.09	1.22	1.40	1.16	1.43	1.51	1.40	1.37	1.48
FROM	məşsi	Diseases of Circulatory Sy	1.33		1.76	1.72	1.64	1.71	1.85	22.78	2.76	2.90	2.73	3.14	3.43	3.40	3.65	3.45	2.87	3.15	3.36	3.34
	snoa4a	N to esessol N System	1.36	1.36 1.36	1.23	1.06	0.98	00.1	20.0	0.95	*88.0 88.0 88.0		*0.00			0.73*	0.67*	0.80	1.28*	1.29*		1.04
POPULATION		Cancer	.89		2000	1.12	27.1 1.12 1.12 1.13	1.17	1.27	1.26	1.34	1.35	1.43	1.52	1.46	1.62	1.55	1.59	1.77	1.75		. e3
	losis	Other Forms	22.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	22.	529	21.8	16	13	15	21.	135	13	01.	80.	.07	88	.07	10	60.	200.	0.07	en.
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		Enteric Fever	4.00.00	50. 8	999	5 5	2 9 9	0.00	8.8	888	366	80	38	29	8 8	9 l	000	80	:00	9	8 0.	
	ity Binths	Infant Mortal 000,1 rsq sinr	150 111 129	118 126	2000	8 8 8 8 8 8	2 8 8	83 73	80	73	79	70	99	89	67	61	60 70 70	8	56	42	404	4.1
		Death-rate	15.0	4.4.0 7.6.4.0	12.6	12.6	11.3	11.0	11.5	6.83	13.5	11.6	11.3	10.9	11.3	10.9	11.4	5. 00	18:0	11.3		
		Birth-rate	26.1 26.1 27.3																			-1
	əlpbim	Population Estimated to of each year	842,337 850,947 859,644											-								3
		YEAR.	1911		1917			1923			1929 1930	-	1932 1933 1,			1937 1, 1938 1,				1944		1
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	AGES AT DEATH	Sex 0- 1- 2- 5- 15- 25- 45-	M. F.
	AGES AT DEATH	Sex 0- 1- 2- 5- 15- 25- 45-	M. F.
	AGES AT DEATH	Sex 0- 1- 2- 5- 15- 25- 45-	M. F.
	AGES AT DEATH	Sex 0- 1- 2- 5- 15- 25- 45-	Paratyphoid M. — — — — — — — — — — — — — — — — — —
	AGES AT DEATH	Sex 0- 1- 2- 5- 15- 25- 45-	Paratyphoid M. — — — — — — — — — — — — — — — — — —

TABLE III

CASES OF INFECTIOUS DISEASE NOTIFIED AND VERIFIED DURING 1947 CLASSIFIED ACCORDING TO SEX AND AGE

Disease	Sex		· · ·		,	1		GRO							Total
		0-1	1-2	3-4	5-9	10-14	15-19	20-24	25-34	35-4	45-54	4 55-64	4 65-74	75 up	
Enteric Fever	M. F.		=			1	_	1 3	1	1	1	1	=	_	7
Scarlet Fever	M. F.	$\frac{3}{2}$.	51 54	136 124	271 252	117 178	51 50	15 31	15 23	10 13	2 5	1 2	1	E	673 734
Diphtheria	M. F.	4	12 8	29 26	27 29	10 25	4 11	$\begin{bmatrix} 2 \\ 10 \end{bmatrix}$	3 11	3 3	2	2	=	E	98 125
Erysipelas	M. F.	1	3 3	1	3 4	2 4	3 4	4 3	8 22	35 19	29 40	15 40	9 22	4 7	116 170
Pulmonary Tuberculosis	M. F.	5 3	26 17	17 14	29 21	16 16	81 86	87 94	133 129	100 55	109	93 20	28 5	3 3	727 496
Tubercular Meningitis	M. F.	1	6 3	2 2	4	2	4		1				=	=	11 15
Tuberculosis of Peritoneum & Intestines	M. F.	=	1	1	=	1 1	1 1	2	3	_	=	1	1 1	_	6 9
Other forms of Tuberculosis	M. F.	1	8 6	5 4	8 4	9 9	8 12	5 9	10 8	6	12 6	3 2	2	=	74 69
Cerebro-spinal Fever	M. F.	13 8	6 7	6 5	8 6	5 6	8 3	1 2	2 5	3	1 1	- 1	1	1	55 45
Anterior Poliomyelitis	M. F.	1 5	18 4	15 12	15 19	16 7	6	3 9	11 13	4 6	1				90 82
Polio-encephalitis	M. F.	=	1		=	1		_	=	_	=	=	=		2 1
Encephalitis Lethargica	M. F.	=	1	1 1	=					1 2	=			=	31
Malaria	M. F.		=	=	=	=		4	8	2		=			14
Dysentery	M. F.	6	21 15	2 3	2		1	1	5 4	2 2		1	=		41 21
Smallpox	M. F.		=	=	=		=	_1	=	=	=	_	=		
Pneumonia	M. F.	49 39	76 64	50 52	56 42	25 16	35 22	24 17	64 37	77 46	104 50	87 45	75 39	31 37	75: 500
Ophthalmia Neonatorum	M. F.	469 349				=	=	=	=			=			46: 349
Puerperal Pyrexia	M. F.			=	=		13	69	129	37			-	=	24
Measles	M. F.				1987 2047		59 69	14 51	31 53	10 14	2 2		1	=	582 ₁ 595
Whooping Cough	М. F.	217 250				11 16	1 3	4	3 7	3 4		$-{2}$	=	=	177 208
Undulant Fever	M. F.	_	_	=	1	=	=						=	=	-

BLE IV
BIRTH, DEATH AND INFANT MORTALITY RATES IN WARDS, 1947

		BIR	THS	DEA	THS	INFANT	
WARDS	Estimated	37	Rate per	37	Rate per	371	Rate per
	Population	Number	1,000 population	Number	1,000 population	Number	1,000 live births
			7-7		Population		
Paul's	19,423	540	27.8	290	14.9	28	52
			25.8				
:. Mary's	15,618	403		244	15.6	21	52
uddeston and Nechells	24,253	722	29.8	345	14.2	41	57
:. Bartholomew's	16,601	497	29.9	252	15.2	21	42
Martin's and Deritend	18,934	539	28.5	319	16.8	28	52
arket Hall	12,475	335	26.9	209	16.8	29	87
, ,	22,281	598	26.8	342	15.3	37	62
	22,201	000	200	012	100	0,	02
verage Rate of Central	100 505	2.224	20.0	2 001	15.4	005	
Wards	129,585	3,634	28.0	2,001	15.4	205	56
ozells	25,773	573	22.2	349	13.5	21	37
ston	27,296	683	25.0	364	13.3	33	48
ashwood Heath	32,577	666	20.4	318	9.8	21	32
	24,302	597	24.6	280	11.5	26	44
- 11 TT 41-	1		23.7			20	
nall Heath	27,446	650		299	10.9		34
arkbrook	27,936	742	26.6	333	11.9	35	47
ılsall Heath	28,772	766	26.6	379	13.2	47	61
lgbaston	30,022	553	18.4	336	11.2	14	25
otton Park	27,011	625	23.1	375	13.9	25	40
l Saints'	24,327	595	24.5	333	13.7	34	57
verage Rate of Inner Ring		النند					
****	275,462	6,450	23.4	3,366	12.2	278	43
Wards	273,402	0,430	20.4	3,300	12.2	278	43
	24.00-	400	00.5	004	10.0	- 1	
ho	24,297	498	20.5	321	13.2	18	36
ndwell	21,877	378	17.3	261	11.9	11	29
indsworth	29,721	593	20.0	385	13.0	14	24
rry Barr	77,848	1,638	21.0	524	6.7	56	34
dington	34,987	615	17.6	322	9.2	21	34
arraller Uill	31,996	704	22.0	347	10.8	34	48
	29,332	659	22.4	298	10.2	29	44
1. 6 3							
echford	63,405	1,536	24.2	449	7.1	52	34
ırdley	37,201	798	21.5	329	8.8	39	49
ocks Green	37,607	729	19.4	350	9.3	22	30
ıll Green	48,215	910	18.9	393	8.2	17	19
arkhill	33,565	734	21.9	426	12.7	24	33
seley and King's Heath	47,377	968	20.4	522	11.0	27	28
11 0-1-	31,780	652	20.5	368	11.6	23	35
ma's Mantan	37,920	795	21.0	431	11.4	33	42
orthfield	48,394	1,046	21.6	405	8.4	41	39
rborne	35,661	594	16.7	353	9.9	24	40
erage Rate of Outer							
Ring Wards	671,183	13,847	20.6	6,484	9.7	485	35
ard of domicile not							
		1		140			
known		4		148	_	4	
				11.00-			
у	1,076,230	23,935	22.2	11,999	11.1	972	41
-							

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